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ROYAL COMMISSION OF INQUIRY INTO CERTAIN
DEATHS AT THE HOSPITAL FOR SICK CHILDREN AND
RELATED MATTERS.

Hearing held
8th floor
180 Dundas Street West
Toronto, Ontario

The Honourable Mr. Justice S.G.M. Grange

Commissioner

P.S.A. Lamek, Q.C.

Counsel

E.A. Cronk

Associate Counsel

Thomas Millar

Administrator

Transcript of evidence
for

March 19, 1984

VOLUME 118

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ROYAL COMMISSION OF INQUIRY INTO CERTAIN
DEATHS AT THE HOSPITAL FOR SICK CHILDREN
AND RELATED MATTERS.

Hearing held on the 8th Floor,
180 Dundas Street West, Toronto,
Ontario, on Monday, the 19th
day of March, 1984.

- - - -

THE HONOURABLE MR. JUSTICE S.G.M. GRANGE - Commissioner
THOMAS MILLAR - Administrator
MURRAY R. ELLIOT - Registrar

APPEARANCES:

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I.J. ROLAND M. THOMSON R. BATTY	Counsel for The Hospital for Sick Children
B. PERCIVAL, Q.C.	Counsel for The Metropolitan Toronto Police
K. CHOWN	Counsel for numerous Doctors at The Hospital for Sick Children
F. KITELY	Counsel for the Registered Nurses' Association of Ontario and 35 Registered Nurses at The Hospital for Sick Children
H. SOLOMON	Counsel for The Ontario Registered Nursing Assistants

(Cont'd) ...



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APPEARANCES: (Cont'd)

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Counsel for Susan Nelles -
Nurse

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Nurse

M. ROSENBERG

Counsel for Sui Scott -
Nurse

B. KNAZAN

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S. LABOW

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Inwood, Mr. & Mrs. Turner, Mr. &
Mrs. Lutes, and Mr. & Mrs.
Murphy (parents of deceased
children)

F.J. SHANAHAN

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Lombardo (parents of deceased
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Heather Dawson (mother of
deceased child Amber Dawson)

W.W. TOBIAS

Counsel for Mr. & Mrs. Hines
(parents of deceased child
Jordan Hines)

J. SHINEHOFT

Counsel for Lorie Pacsai and
Kevin Garnet (parents of
deceased child Kevin Pacsai).



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5671	2	"unsung" should be "unseen"
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DM.jc
A

1
2 --- Upon commencing at 10:00 a.m.

3 THE COMMISSIONER: I want to say
4 something about next week. As you know the Court
5 of Appeal are hearing the matter on Monday, and maybe
6 Tuesday of next week. But we have, as you will
7 discover, serious accommodation problems and I want
8 to make sure that we are finished with - I mustn't
9 use that phrase, I must make sure that Mrs. Christie's
evidence is completed by the end of that week.

10 Now I understand, Mr. Knazan, you
11 are not concerned with the Court of Appeal, are you?

12 MR. KNAZAN: That's correct.

13 THE COMMISSIONER: And Miss Cronk
14 will be leading Mrs. Christie. Now the only problem
15 is with the rest of you, and obviously we can
16 accommodate the Court of Appeal, I am quite sure they
17 won't allow the matter to go longer than two days
18 and we can accommodate everybody, but I would like
19 you all to consider where you want to be, and whom
20 you want to have where, and in what Court. I feel
21 reasonably sure that at least the Monday Miss Cronk
22 and Mr. Knazan will keep the witness occupied and
23 there won't be any problem about that as long as
24 somebody can start the cross-examination on Tuesday.
25 Anyway, would you think about it and if anybody finds



A.2

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2

it is impossible let me know, as otherwise we will
plan to start Mrs. Christie's evidence on Monday.

4

Yes, Mr. Lamek?

5

6

MR. LAMEK: Before I call the next
witness, Mr. Commissioner, I understand Mr. Knazan
has something he wants to say.

7

8

THE COMMISSIONER: Yes, all right.
Yes, Mr. Knazan?

9

10

11

MR. KNAZAN: Mr. Commissioner, an
article appeared in the Globe and Mail on Saturday,
March the 17th, with a photograph of yourself.

12

13

THE COMMISSIONER: Not the most
flattering.

14

15

MR. KNAZAN: One paragraph, after
cataloguing supposed accusations against Mrs. Trayner,
the writer states:

16

17

18

19

"And she apparently is eager to
defend herself against the
accusations as are all the members
of her nursing team."

20

21

22

23

24

25

In view of your repeated statements
about wanting to maintain fairness in the press as
well as in the hearings, I would ask you to reiterate
at this time that no one is accused of anything, and
in the case of Mrs. Christie she is appearing as a



A.3.

1
2 voluntary not a subpoenaed witness. If she was
3 accused of something her position might be different.

4 THE COMMISSIONER: Yes. Well, no one
5 of course is accused of anything. I suppose I had
6 better reiterate this even more strongly today than
7 usual, because the Court of Appeal are going to
8 consider this problem on Monday. Not only is no one
9 accused of anything but I am not allowed to make
10 an accusation against anyone. All I am allowed to do
11 is make the findings of fact as to how, and by what
12 means these children met their deaths. No accusation
13 is being levelled against anyone, except maybe some
14 photographers working for the Globe and Mail.

15 Yes, all right. Mr. Lamek?

16 MR. LAMEK: Mr. Commissioner,
17 Mr. Knazan is quite right, Mrs. Christie will be
18 appearing as a voluntary witness who has not been
19 subpoenaed, but it should be said the same is true
20 of all the other members of the team, to the best of
21 my knowledge nobody has required a subpoena to attend
22 here yet.

23 THE COMMISSIONER: No. It is almost
24 true, it is almost true, we did have one only to
25 answer some American law.

MR. LAMEK: That's right.



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THE COMMISSIONER: And those were the very people that our subpoena wouldn't stretch to but they were the ones who insisted upon having it.

MR. LAMEK: After they arrived.

THE COMMISSIONER: After they arrived, yes. No one has so far required a subpoena.

MR. LAMEK: May I call please the next witness, Mrs. Sui Scott?

THE COMMISSIONER: Yes, all right.

SUI SCOTT, Sworn

DIRECT EXAMINATION BY MR. LAMEK:

Q Mrs. Scott, I understand that you were born and educated up to the high school graduation at least in Malaysia?

A Yes.

Q And you then, as I understand it, went to England and in 1965 you enrolled in the School of Nursing at the Royal United Hospital in Bath, in Somerset, is that right?

A Yes.

Q You completed that course and received your qualifications as a Registered Nurse in 1968?

A That's right.

Q And then you stayed, as I



A.5

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5

understand it, at that hospital as a graduate nurse for a short period of a month and then you married and moved with your husband to Hull in the north of England, did you not?

6

A. Yes.

7

8

Q. And there you worked as a registered nurse at the General Hospital in Hull for approximately six months?

9

A. Yes.

10

11

Q. Subsequently, in April of 1970, you came to Canada, originally to Montreal?

12

A. Yes.

13

14

Q. And in August, 1977, you moved to Toronto, do I have that correctly?

15

A. Yes.

16

17

Q. Now, you had not worked as a nurse since coming to Canada, had you?

18

A. No.

19

20

21

Q. But after coming to Toronto you decided to get back into nursing and you took a refresher course and wrote the Registered Nurse's examinations and qualified to practise in Ontario as a Registered Nurse, in 1979 I think?

22

A. Yes.

23

24

25

Q. You became employed at The



A.6

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2

Hospital for Sick Children in February of 1980?

3

A. Yes.

4

Q. From that time until now have
you worked in The Hospital for Sick Children?

5

6

A. Yes.

7

Q. And throughout the period have
you worked in the Cardiology Services?

8

A. Yes.

9

Q. Other than some casual part-
time employment, when you joined the staff at The
Hospital for Sick Children, was that your first
employment as a nurse in ten or eleven years?

10

11

12

13

A. Yes.

14

Q. Was it your first professional
experience in a paediatric setting?

15

16

A. Yes.

17

Q. And was it your first
experience of cardiology?

18

A. Yes.

19

Q. Now, Mrs. Scott, we know that
prior to April the 1st, 1980 the Cardiology Ward
was Ward 5A on the 5th floor of the Hospital, was
that where you started?

20

21

22

A. Yes.

23

24

Q. A few weeks after you joined the

25



A. 7

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staff of the Hospital you moved I take it with everybody else in the Cardiology Service to Wards 4A and 4B on the 4th floor?

5

A. Yes.

6

7

8

Q. Can you recall, Mrs. Scott, when you first started on Ward 5A in February of 1980 of whose nursing team you were a member?

9

A. I don't recall.

10

Q. You can't remember that?

11

A. No.

12

13

Q. Do you remember whether you and Phyllis Trayner, then Phyllis Morrin, were members of the same team on 5A?

14

A. I don't know, when I joined she was away on holidays.

15

16

Q. She was away on holiday when you joined?

17

A. Yes.

18

19

20

Q. Did you work with Mrs. Trayner or Miss Morrin as she then was at all on the 5th floor, that you can now remember?

21

A. I think so, not all the time.

22

Q. What, occasional shifts?

23

A. Yes.

24

Q. Were you and Susan Nelles

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members of the same team on the 5th floor?

A. I don't recall.

Q. You don't recall that. Do you recall whether you worked at all with Miss Nelles while you were on the 5th floor?

A. I don't think so.

Q. You don't think so. Okay. Now when the Cardiology Service moved to Wards 4A and 4B, Miss Morrin, Mrs. Trayner, let's call her Mrs. Trayner and we know who we are referring to, Mrs. Trayner became a team leader you remember?

A. Yes.

Q. And did you then become a member of her team?

A. Yes.

Q. From the time of the move down to 4A/4B you were on Mrs. Trayner's team, were you?

A. That's right.

Q. And we know that Nurse Nelles joined that team a little later in the summer of 1980, is that your recollection too?

A. Yes.

Q. Can you tell me please, how did you and Miss Nelles get along, not just at the beginning when you first joined the team, but from the



A.9

1

2

time she started to work with you until the time she
left in March of 1981?

3

4

A. We got along fine.

5

6

Q. Did you find her a pleasant
and easy person to work with?

7

A. Yes, she was very friendly.

8

Q. Did you form the impression of
her qualities as a nurse?

9

A. Yes, she was very efficient.

10

11

Q. Now I ask you, how did you and
Mrs. Trayner get along from the time you began to
work together?

12

13

A. We got along all right.

14

15

Q. Was your working relationship
with Mrs. Trayner as satisfactory as your working
relationship with Miss Nelles?

16

17

A. I would prefer to work with
Susan Nelles.

18

19

THE COMMISSIONER: I am sorry, I
missed that Mrs. Scott, what did you say?

20

21

THE WITNESS: I would prefer to work
with Susan Nelles.

22

23

24

25

THE COMMISSIONER: All right, yes.

MR. LAMEK: Q. From your observations
Mrs. Scott, how did Mrs. Trayner and Miss Nelles



A.10

1

2

get along with each other?

3

A. They disagreed most of the time.

4

Q. They disagreed most of the time.

5

Do you have any recollection of particular incidents of disagreement?

6

7

A. No, there were so many.

8

9

10

11

A. Off and on.

12

13

14

15

Q. Off and on. Were they more frequent in the early stages of the working relationship, or did they continue at about the same frequency throughout?

16

17

A. I think they continued about the same frequency.

18

19

Q. And again from your observation Mrs. Scott, how did other nurses on the floor get along with Miss Nelles?

20

21

A. They liked her.

22

23

24

25

Q. And from your observation how did they get along with Mrs. Trayner?

A. They were quite friendly with her.



A.11

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2

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THE COMMISSIONER: I am sorry, I missed that again, what?

4

5

THE WITNESS: They were quite friendly with her, other than that I don't know.

6

THE COMMISSIONER: Yes, all right.

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MR. LAMEK: Q Now, Mrs. Scott, as you know we are concerned with a number of deaths that occurred on the Cardiology wards between the very end of June 1980 until the end of the third week of March of 1981. I tell you I have had a chart prepared showing which nurses were present for which of the deaths with which we are concerned. I know you and I have discussed this before but I want to show it to you and perhaps we can explain it.



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EMT/cr

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I tell you, first of all, Mrs. Scott, that I have not listed on this chart every child who died in that period. I have listed those who died in the period and were categorized by the authors of the Atlanta Report as having any measure of suspicion attaching to their deaths. That is to say the Atlanta categories A and B. You have seen those I think.

A. Yes.

Q. Now on the left-hand side of the chart I have listed each of those children and there are some 29 of them with an indication as to whether the Atlanta Report categorized them as A or B deaths.

Then in the next column we have got the date and time of their deaths, and in the third column the ward upon which they either died or suffered an onset of critical symptoms and where it is known the room number in which the child was.

A. Yes.

Q. You will see right at the very top the Woodcock child. We don't know what room Woodcock was in, therefore we can't state that one. Similarly Taylor, the third child, we don't know the room, and with the case of Onofre, about half



1
2 way down, we think he was in Room 438, but we are not
3 absolutely sure. But in other cases we have been
4 able to get it either from the chart or from the
5 assignment books.

6 Then across the top I have listed with
7 a column for each the more or less regular members
8 of each of the 4A and 4B nursing teams that worked
9 opposite each other at the same time.

10 Just so that we are sure we understand
11 the initials, we have reading from left to right,
12 Phyllis Trayner, Susan Nelles, yourself, Sui Scott,
13 Mrs. Christie, Janet Brownless, Bertha Bell, Mrs.
14 Bracewell, Yvonne Lyons, Mary Jean Halpenny, Debbie
15 Harwood Jones, Shirley Parcels, Susan Reaper, Meredith
16 Frise and Karen Power. Fair enough?

17 A. Yes.

18 Q. And then there is a blank
19 column and whether we will use that for added
20 starters or not I am not sure. And then finally
21 there is a comment column and I will come to that
22 in a moment.

23 Now from the legend at the top here
24 what we have done is to mark with an X those nurses
25 who are on duty on that particular ward upon which
each child either died or suffered an onset of
critical symptoms. So let's, for example, look at



1
2 Taylor, the third one.

3 The nurses - he died on 4B as we see
4 from the third column - the nurses on duty on 4B
5 that night were Miss Bracewell, Yvonne Lyons and
6 Shirley Ann Parcels. And on 4A there was Mrs.
7 Trayner, Miss Nelles, yourself and Mrs. Christie.
8 Is that clear?

9 A. Yes.

10 Q. And then we have attempted
11 to identify from the charts or from the assignment
12 books or from anything else that was available to
13 us which nurse was caring for the child at the time
14 that that child got into trouble, and that is marked
15 with an asterisk. We haven't been able to do that
16 with every child with absolute certainty, but to
17 the best we can do it they are so marked.

18 And then finally in some of the
19 squares under the nurses' names you will see a plus
20 sign in the lower right hand side and that flags
21 you to look over in the comment column.

22 For example, looking again at
23 Taylor. Your name, your column has a plus sign in
24 it, and if I look over to the right I see that from
25 the assignment book you were relieving on Ward 8E.
that night?



1

2

A. Yes.

3

Q. And similarly, Mrs. Christie

4

has a plus sign indicating a comment and she relieved

5

on 5C that night. And then there is an additional

6

comment that according to the chart Miss Bracewell

7

was in charge of Taylor. Is that right?

8

A. Yes.

3

9

Q. Now you have seen this chart
before, have you not?

10

A. Yes.

11

Q. When you and I talked a

12

few days ago, and you were good enough to look down

13

the column under your own name, and can you tell

14

me, please, to the best of your recollection does

15

that accurately record your presence or absence from
the ward at the times the children died?

16

A. Yes.

17

MR. LAMEK: Mr. Commissioner, I trust

18

the rest of it is equally accurate. We have done our
best to check it.

19

THE COMMISSIONER: Yes.

20

MR. LAMEK: May that be the next

21

exhibit, please.

22

THE COMMISSIONER: Exhibit 383.

23

---EXHIBIT NO. 383: Chart showing nurses on duty
when certain babies died.

24

25



Scott, dr.ex.
(Lamek)

6766

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MR. LAMEK: Q. I will leave that with you just in case we need to refer to it, Mrs. Scott.

A. Thank you.

THE COMMISSIONER: Have you got a spare copy of that?

MR. LAMEK: Yes, indeed.

THE COMMISSIONER: Just one - KP stands for whom?

MR. LAMEK: Karen Power.

Q. Perhaps you could just look at one more example there to be sure that we all understand exactly what is set out on the chart, Mrs. Scott. If you look at the Dawson child who is the fourth one listed. Amber Dawson. The chart discloses I believe that the child died at 2:40 in the morning of July 28th in Room 418 which is on Ward 4A. The nurses on duty that night on 4A were Phyllis Trayner, Susan Nelles, yourself, Mariahne Christie.

Susan Nelles from the asterisk was providing care for the child that night, and Marianne

Christie we seen from the note column was being shared with Ward 4B?

A. Yes.



1
2 Q. And the nurses on 4B that
3 night were Miss Bracewell, Miss Lyons and Miss
4 Parcels. Is that right?

5 A. Yes.

6 Q. Good. Thank you.

7 Now from the chart, Mrs. Scott, it
8 appears that in the case of 17 of the deaths you
9 were on duty on the ward where the child either died or
10 suffered the onset of critical symptoms, and you
11 were on duty at the time but not on the ward in the
12 case of five of the deaths. Do I have that
correctly?

13 A. Yes.

14 Q. When I say not on the ward,
15 although the note at the bottom says on duty on
16 the opposite ward, it may be that you were on duty
17 somewhere else in the Hospital relieving as, for
18 example, you were in the case of Taylor. It is not
19 that you were just not on the ward where he died;
you were relieving on Ward 8E that night?

20 A. Yes.

21 Q. Okay.

22 Now it appears again from the chart,
23 Mrs. Scott, that the first child for whose death
24 you were on duty and on the same ward as the child
25



Scott, dr.ex.
(Lamek)

1
2 was Amber Dawson who died in the small hours of
3 July 28th. Do I have that correctly?

4 A. Yes.

5 Q. Going back up to the top for
6 a moment you had been on duty on Ward 4A the long
7 night that Laura Woodcock got into trouble but she
8 was on Ward 4B and she in fact died after your shift
had gone off duty. Do you remember that?

9 She died at 9:40 in the morning and
10 you had been on long nights on Ward 4A the night
11 before?

12 A. Yes.

13 Q. Did you learn that Laura
14 Woodcock had died?

15 A. Yes, when I came back.

16 Q. Did you know enough about
17 Baby Woodcock at that time to have any views as
to whether her death was expected or unexpected?

18 A. I am afraid I don't know
19 her at all.

20 Q. Did you gain any impression
21 from other nurses on the floor or from doctors as
22 to whether her death was an expected or unexpected
one?

23 A. No.

24

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Scott, dr.ex.
(Lamek)

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Q. Now not listed on this chart but in fact next in order to die was a child as to whose death the authors of the Atlanta Report saw no element of suspicion; that is to say Alan Perreault. He died in the early afternoon of July 8th, and in fact you were on duty that afternoon with Mrs. Trayner, were you not? Can I assist you, if I need to, with the assignment books or the WIN sheets, but I tell you that my records show you were on duty the afternoon that Alan Perreault died. He is not on this chart.

A. No.

Q. Do you remember Alan Perreault?

A. No.

Q. You were not assigned to care for him according to the assignment book, I can tell you that, and you have no recollection of him I take it?

A. No.

Q. And the next child to die is on the chart and that was Baby Bilodeau, the early morning of July 22nd, but you were not on duty at all at the Hospital the night that child died?

A. That is right.

Q. Did you subsequently learn that



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TORONTO, ONTARIO

Scott, dr.ex.
(Lamek)

6770

1

he had died?

2

A. Yes.

3

Q. When was that?

4

A. When I came back.

5

Q. Had you had any contact with

6

that child prior to his death?

7

A. I don't think so.

8

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- - - - -

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Q. All right. And did you have any basis for forming an opinion as to whether his death was expected or unexpected?

A. No.

Q. All right. With respect to David Taylor, the next child on the chart, you were on duty that night but you were not working on the cardiology ward, as I understand it you were relieving on Ward 8E.

A. Yes.

Q. I take it that is on the eighth floor of the hospital?

A. Yes.

Q. All right. Do you recall whether in the course of that long night shift you were on Ward 4A or 4B at all?

A. No, I wasn't there.

Q. You were not there.

A. No.

Q. Did you similarly learn of David Taylor's death?

A. Yes, I did.

Q. At the end of that shift or on a subsequent shift, do you remember?

A. Not at the end of that shift.



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2

3

Q. All right. When you were next
on the ward?

4

A. Yes.

5

6

7

Q. Similarly, did you have any
information about the Taylor child which enabled you
to form any impression as to whether his death was
expected or unexpected?

8

9

A. Later we were told but not at that
time.

10

Q. Later you were told what by whom?

11

12

A. No, later we were told about the
condition of all the children that had died but not
at that time, immediately after his death.

13

14

15

Q. Was that the only information
that you ever had upon which to form any judgment as
to whether his death was expected or not?

16

17

18

A. Well, I don't have much experience,
previous experience in cardiology, so, I don't have
any basis to form any opinions.

19

20

21

22

23

24

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Q. All right. The very next night
after Baby Taylor had died Amber Dawson had died
and you were on duty on 4A when she died, although
you were not assigned to care for that child that night.
Prior to the night of her death, that's the night of
July 27th to 28th, Mrs. Scott, prior to that had you



3 2 had any contact with Baby Dawson; she had been in
3 the hospital since the 23rd of July.

4 A. I had looked after her before
5 but not that night.

6 Q. Not I think within the 48 hours
7 preceding her death.

8 A. No.

9 Q. All right. Do you have any recollec-
10 tion of the events leading up to her cardiac arrest
11 and death in the early morning of July 28th?

12 A. No, I don't think I was in the
13 room when she took a turn for the worst.

14 Q. Were you present at the resuscita-
15 tion effort?

16 A. Yes.

17 Q. Do you have any recollection of
18 that resuscitation effort and what you were doing?

19 A. I think most probably I was help-
20 ing drawing of the drug.

21 Q. You say most probably.

22 A. Yes.

23 Q. Do you have any recollection of
24 that though?

25 A. No.

O. Fine. And no clear recollection



1
4 2 I take it from what you have said of the child or
3 of the circumstances of her death.

4 A. No.

5 Q. Okay. Now, three nights later
6 you were again on duty on Ward 4A when Lillian Hoos
7 died on that ward. Once again, the child had not
8 been assigned to you for nursing care that night.
9 She had been in the hospital since July 16th. Do you
10 recall whether you had cared for her at all since the
time of her admission?

11 A. I don't recall; maybe once or
12 twice.

13 Q. All right. Certainly I can
14 suggest to you, Mrs. Scott, from my research of the
15 matter that you had not cared for her within the 48
hours preceding her death, is that your recollection?

16 A. Yes.

17 Q. Okay. Do you have any recollec-
18 tion of the events leading to the arrest and the
19 death of Lillian Hoos in the early morning of July
20 31st?

21 A. No.

22 Q. Were you present at the resuscita-
23 tion effort on that child?

24 A. Yes.
25



1

5

2

Q. Do you recall what you were

3

doing?

4

A. No.

5

Q. Do you have any other recollection

6

of the resuscitation effort?

7

A. No.

8

Q. Did you derive any impression from

9

the reactions of others on the floor, doctors or

10

nurses, as to whether that child's death was expected
or unexpected?

11

A. Immediately after her death?

12

Q. Well, let's start there, yes,

13

immediately after her death, did you subsequently
gain any such impression?

14

A. I don't recall.

15

Q. You don't recall. Well, let's

16

pause there because we've got to the end of July, Mrs.

17

Scott. In the period from June 30th until July 31st

18

six children had died on the cardiology ward; five

19

listed on the chart plus Alan Perreault. At the end

20

of July did you have sufficient experience of the

21

pediatric cardiology service to have any view as to

22

whether that was an unusually large number of

23

deaths in the period of a month?

24

A. No.

25



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O. Certainly I take it it was rather more deaths than you had been seeing in the period from February when you joined until the end of June.

A. Yes.

O. Did you ask anybody whether the number of deaths that had occurred in the course of the month was an unusually large number?

A. Well, we talked about it and it was in the middle of August or towards the end of August we were told by the doctors that it was not our fault that the babies were very sick, it had something to do with their anatomies and we had done the best we could.

Q. Okay. And that was into August. Do you remember any discussion at the end of July as to the number of deaths that had occurred?

A. No.

Q. Did you have any impression from others on the floor, doctors or nurses, at the end of July, that a surprisingly large number of children had died on the ward in that month?

A. No.

Q. Okay. Were you aware however at the end of July that all of the children who had died on the wards in that month had died or suffered an



1
2 onset of terminal symptoms when your team was on duty;
3 not necessarily you personally but your team, were
4 you aware of that?

5 A. Not at that time.

6 Q. Were you aware at the end of
7 July that of the six who had died as of June 30th
8 four had died between the hours of 2 and 3:30 a.m.?

9 A. Not at that time.

10 Q. That hadn't registered as an
11 element in these?

12 A. No.

13 Q. And do you recall any discussion
14 as to whether anyone had observed that four out of
15 the six children had died in the small hours of the
16 morning, as of the end of July?

17 A. I don't think anybody did.

18 Q. All right. Well, let's move into
19 August, Mrs. Scott. On August 1st, the very night after
20 Lillian Hoos had died, you were again on duty I think.
21 Would it be helpful to you to have the WIN sheets
22 available?

23 A. Yes.

24 Q. Would it, okay. I wonder if
25 I can borrow the exhibit copy, please.

There you go, Mrs. Scott. That way I



8
1
2
3 can be sure that I am not misstating your presence.
4 I believe you worked the long night shift of July 31
5 to August 1, did you not?

6 A. What date?

7 Q. I'm sorry?

8 A. What date?

9 Q. July 31 to August 1, the shift
10 that started 7, 7:30 on the evening of July 31st.

11 A. Yes.

12 Q. You were working the long night?

13 A. Yes.

14 Q. And that was the night that a
15 child called Phillip Turner got into trouble and
16 died, do you remember that?

17 A. Yes.

18 Q. Okay. Again, you weren't assigned
19 to care for that child, it was Nurse Nelles' patient
20 that night that you were working on the floor.

21 A. Right.

22 Q. Do you have any recollection of the
23 events leading up to that child's arrest and death?

24 A. No.

25 Q. Were you present at the resuscita-
tion attempt on that child?

A. Yes.



1

9

2

3

Q. Do you remember what you were doing?

4

A. Tidying up.

5

6

Q. You were tidying up. Is that after the resuscitation effort was over?

7

A. Yes.

8

Q. Do you remember what you were doing while the arrest team was actually working?

9

10

A. I was setting up the cutdown tray and the I.V. solution.

11

12

Q. Had you had any contact with Baby Turner prior to the night he died; I should tell you he came into the hospital on July 17th.

13

14

A. I don't recall.

15

16

Q. Okay. Certainly I see no indication that you had cared for him in the 48 hours or so preceding his death.

17

18

Did you have any information about that child which enabled you to form a view as to whether his death was expected or not?

19

20

A. No.

21

22

23

Q. Did you gain any impression from other nurses on the floor or from doctors as to whether they regarded his death as expected or unexpected at the time?

24

25



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1

2

A. No.

3

O. Okay. Now, the next child to

4

die on the ward is again one who is not on the chart,

5

he was not categorized in Categories A or B by the

6

Atlanta people, that was Dion Shrum. He died

7

August 9, 7:45 p.m., just after the shift change.

8

He died on Ward 4A.

9

Now, you had been on long day duty I

10

think on August 9th. I would like you to take the

11

WIN sheets and I think you will be able to confirm that
for me.

12

13

14

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DM/PS

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A. Yes.

O. It shows you worked long days on
August 9th?

A. Yes.

O. It also shows you were relieving
on Ward 8E , does it not?

A. Yes.

O. So you were not on the cardiology
floor that day?

A. No.

O. On the night of August 18th to
19th, you worked the long night shift on Ward 4A, I
believe, is that so?

A. Yes.

O. And that was the night that
Kelly Monteith, Kelly Ann Monteith died, a little
girl. She was not your patient that night, she was
assigned to Nurse Nelles for care. Do you have any
recollection of the events of that night leading to
that child's arrest and death?

A. No.

O. Were you present at the resuscita-
tion effort?

A. Yes.

O. Do you recall what you were doing?



1

2

2

A. I don't.

3

Q. Do you recall who else was there?

4

A. No.

5

Q. And had you had any prior
contact with that child prior to the night she died?

6

A. I don't think so.

7

Q. Did you gain any impression from
the reactions of others on the floor, doctors or
nurses, as to whether Kelly Ann Monteith's
death was expected or unexpected?

10

11

A. Immediately after the death?

12

Q. Let's start immediately after
the death.

13

A. No.

14

Q. Did you subsequently gain such
an impression?

15

16

A. I don't know, I don't recall.

17

Q. You also worked the long night of
August 23rd to August 24th on Ward 4A, and that night
two patients died on the ward I believe, only one
of them appears on the chart. The first was Paul
Murphy, he was the older child you remember.

18

19

20

21

A. Yes.

22

Q. And he died in Room 423 in the
early part of the shift.

23

24

25



1

2

3

A. Yes.

3

Q. And then later that night Antonio Velasquez died, do you remember the Velasquez child?

4

5

A. Yes.

6

Q. And he died in Room 418 at 4:25

7

in the morning. Neither of those children was your patient that night?

8

A. No.

9

Q. Now, according to the records that

10

I have reviewed Mary Cooney who was working with your

11

team that shift had the misfortune to have been

12

assigned to both of them; do you have any recollection

13

of Miss Cooney working that night with you?

14

A. Yes.

15

Q. With regard to the Velasquez

16

child, had you had any prior contact with that patient?

17

A. Yes, I looked after him.

17

Q. Had you had sufficient contact

18

with him sufficiently close to his death to enable

19

you to form an impression at the time as to whether

20

his death was an expected or an unexpected one?

21

A. I think more on the unexpected

22

one.

23

Q. More on the unexpected. What was

24

it that led you to regard the death as more unexpected

25



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than expected?

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A. Well, there was not much that --
he was irritable and we thought because of the pain
and we just gave him codeine and he became drowsy so
we thought he had too much codeine.

Q. Had you observed anything in that
child's condition or course that led you to think that
he was in danger of suffering a cardiac arrest and
dying?

A. Well, I didn't anticipate his
death that night.

Q. We have heard of the circumstances
of the child's death, were you present when he actually
had the arrest?

A. Yes.

Q. Were you present when the resident
administered naloxone to the child?

A. Yes.

Q. Can you give us your best
recollection of what occurred, please?

A. I was feeding one of my babies --

Q. Would it assist you to have the
chart in front of you?

A. Yes, please.

MR. LAMEK: Could we do that, please,



Mr. Registrar.

O. Perhaps we should say first, Mrs. Scott, that according to the assignment book; that, Mr. Commissioner, is Exhibit 32-C; at tab 89 and page 115, it is probably not necessary for you to look at this. Let me show it to you, however, so that you might recall, the assignment book for Saturday, August 23rd shows that you were looking after three children in Room 418, Volk and someone else and Lombardo, and Miss Cooney had two children in 418, one of whom was Velasquez.

A. Yes.

O. So you had patients in the same room as Velasquez that night?

A. Yes.

O. Can you tell us please what you recall of the circumstances of that child's cardiac arrest and death?

A. I was feeding one of the babies and Miss Cooney was trying to arouse the baby but she couldn't and she was getting worried.

O. She was trying arouse Velasquez?

A. Yes, and she couldn't. I told her to go and get Phyllis because it was easier for her to call Phyllis than for me to put the baby down



1
2 and then go and see what is happening.

3 Q. Yes.

4 A. And she shouted for Phyllis and
5 she came in, and that's all I remember.

6 Q. Do you remember the resident
7 arriving?

8 A. Yes, and he gave narcan plus he
9 thought that he had too much codeine.

10 Q. Yes.

11 A. I think he had two doses that
12 evening.

13 Q. He had had two doses of codeine
14 that evening?

15 A. Yes. Not necessarily the same
16 shift but, you know, just before we came and then
17 another one, and he gave the narcan and the baby
18 seemed to be improved a little bit and then I couldn't
19 recall any more.

20 Q. You don't recall any more. You
21 don't recall what happened immediately prior to the
22 child's arresting?

23 A. No.

24 Q. Were you present during the
25 resuscitation effort on that child?

A. Yes.



1

7

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Q. What were you doing?

3

A. I think I helped Phyllis, I was standing on one side and Phyllis was standing on the other side, I can't remember.

5

6

Q. You can't remember what you were doing, exactly what you were doing?

7

A. No.

8

9

10

11

Q. Was there any discussion among the people on the floor after that child had died as to why he had died? When I say the people on the floor, I refer to doctors and nurses.

12

A. Immediately after the death, or a few days later?

13

14

15

16

17

Q. Let's start with immediately after the death, after all that was the child who died, and you at least were not anticipating his death that evening. Did other people appear to be surprised that the child had died?

18

19

A. Well, they thought that he had too much narcan, the reaction to the narcan, that is what the immediate impression was.

20

21

Q. On the night that he died that was the impression.

22

A. After he died, yes.

23

24

25

Q. Do you remember who first suggested



1

8

2

that as a possible cause of the child's death?

3

A. No.

4

Q. Do you remember whether it was
a physician or a nurse?

5

A. Most probably it was a physician.

6

7

Q. Were you aware of subsequent
discussion about the child's death, or were you involved
in subsequent discussion about the child's death?

8

9

A. No.

10

11

Q. To the best of your knowledge and
information was any other explanation ever advanced
for Baby Velasquez's death, other than reaction to the
Narcan?

12

13

A. No.

14

15

16

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Q. That takes us then to the end of
August, Mrs. Scott. Now from June 30th to the end of
August we have had I think 11 deaths on the ward, 8 of
them are on the charts that are in front of you and we
also had Babies Perreault and Shrum and the child
Murphy. You had been on duty on the particular ward
on which the child died for six of those deaths,
that is to say, Dawson, Hoos, Turner, Monteith and
Velasquez and Murphy. By the end of August were you
concerned about the number of deaths that had occurred
on the ward in the two month period?



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2

A. Not really,

3

O. Not really you say?

4

A. No.

5

Q. Was that because of your lack of
background in cardiology wards and the death rate
you can expect?

7

A. Something like that.

8

9

Q. Did it appear to you that other
nurses on the floor, and doctors, were concerned about
the number of deaths?

10

11

A. They were talking about it.

12

13

Q. Were they talking about it in such
a way as to lead you to think this was an unusual
number of deaths that had occurred in two months?

14

A. No.

15

THE COMMISSIONER: I'm sorry, was it
yes?

16

17

THE WITNESS: No.

18

MR. LAMEK: No, the answer was no.

19

Q. Why did you understand they were
talking about the number of deaths?

20

21

A. They were all talking about the
deaths.

22

23

O. What were you saying about
them?

24

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A. Why they died; why there were so many deaths.

Q. If the question was "Why are there so many deaths", did that not suggest to you that it was an unusually large number of deaths?

A. Not unusual, but we discussed about the deaths.

Q. And what explanations, if any, were being advanced for the so many deaths?

A. As I said before, the doctors were saying that they were very sick babies.

Q. Were they saying that as at the end of August?

A. Yes.

Q. Did that seem to satisfy the inquiries or any concern that the nurses on the floor may have had?

A. Well, we had to accept the explanation.

Q. I understand that you had to accept it, but that wasn't quite my question, Mrs. Scott. Did it seem to satisfy the questions and concerns that the nurses had?

A. Yes.

Q. By the end of August had it occurred



Scott
dr. ex. (Lamek)

11 1
2 to you that almost all of the deaths had occurred when
3 your team had been on duty?

4 A. Yes.

5 Q. Was that a matter of some discussion
6 or comment among the nurses on the floor?

7 A. Yes.

8 Q. What was being said about that?

9 A. They just noticed they were dying
10 almost the same time and always on our team.

11 Q. Did anyone have any explanation to
12 offer, or explanation to advance, as to why your team
13 should be so unfortunate as to have so many children
14 die?

15 A. No.

16 Q. You said a moment ago people were
17 remarking that it was about the same time. Do I take
18 it from that that you were aware by the end of August
19 that of the 11 deaths that had occurred since
20 June 30th, I think seven of them had occurred in
21 the middle of the night, was that a matter that you had
22 observed?

23 A. I think when Phyllis came back
24 from her honeymoon that was, everybody was aware
25 because they made remarks about, you know, your team,
you are getting a lot of bad luck when Phyllis is on,



DM/PS 1
12 2 so we were all aware of that.
3 O. Said you were getting a
4 lot of bad luck when Phyllis was on?
5 A. Yes.
6 Q. But she left for her honeymoon,
7 did she not, right at the end of August, I think
8 August 28th and she was married August 29th.
9 A. Yes.
10 Q. And didn't come back until the
11 third or fourth week in September?
12 A. Yes.. They made that remark when
13 she came back and there were a few deaths.
14 Q. But as at the end of August, had
15 you observed that many of these deaths were occurring
16 in the middle of the night, in the small hours of the
17 morning?
18 A. We sort of --
19 Q. Was that a matter of discussion
20 among the nurses on the floor?
21 A. Yes.
22 Q. Was there speculation or concern
23 as to why the children were dying at that hour of the
24 night?
25 A. We did discuss it but since we
couldn't find any solution we just left it at that.



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DM/PS

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Q. No one could find an explanation?

A. No.

Q. Let's move into September and into the autumn then. We know that in September a couple of mortality and morbidity conferences were held, and Dr. Rowe had told us about those and others. There was one early in the month of September, on September 5th, and then one later in the month if you will remember. Did you attend either of those conferences with Dr. Rowe and other cardiologists?

A. No.

Q. Did you know that they were being held?

A. I knew about it after they were held.

Q. You didn't know about them in advance?

A. No.

Q. Did you learn what had been said at those conferences?

A. I think I read in the Communications book.

Q. You refer to the ward Communications book. I am advised, Mr. Commissioner, that is Exhibit 300. Can we turn first to page 5 of the ward 4A



14

1

2

Communications book which is the first section.

3

Now that is not one of the morbidity or mortality

4

conferences, but it records a short ward meeting on

5

July 31st, 1980. Do you recall if you were present

6

at that meeting?

7

A. No, I don't.

8

Q. Did you from time to time look

9

in the Communications book to find out what was

10

new and of interest going on in the wards?

11

A. Yes.

12

Q. Do you recall seeing the note that

is set out on page 5 of that July 31st, 1980 meeting?

13

Do you recall ever having seen that before?

14

A. Yes.

15

Q. And you will note that the second

topic of that meeting apparently was:

16

"Recent Deaths. News of the cause for

17

Amber is still unknown. Post mortem

18

was done yesterday. Will get more

19

information later but it seems there is

20

an element of surprise re. her cause

21

of death."

22

That I take it refers to Amber Dawson and apparently

23

records a discussion at a meeting on July 31st.

24

25



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Do you recall when you first saw that
note?

A. I don't.

Q. Would it be shortly after
July 31st?

A. Yes. I don't know.

Q. Okay. But it does appear from
the note that there was in the minds of some people
at least an element of surprise about Amber Dawson's
death, does it not?

Having read the note did you discuss
with anybody why there was thought to be an element
of surprise about that child's death?

A. No, I did not.

Q. It goes on to refer to Andrew
Bilodeau. It says:

"An unknown type of truncus.
Probably would not have recovered
and survived catheterization much
less surgery. Lillian Hoos, the
Waterston shunt was widely patent.
Post mortem showed chylothorax.
Query cause of death. It has not
been settled yet."
Do you recall whether after reading



E.2

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that note you asked anybody about the resolution
of any question about the cause of Lillian Hoos' death?

A. No.

Q. All right.

Then there is a note at the bottom
with the number 5.8 which may indicate I suppose
August 5th.

"Dr. Rowe commented that our recent
deaths were all because of anatomy
that could not be fixed."

Do you recall reading that at some
point?

A. Yes.

Q. And that is consistent with
what you told me was the explanation given by the
doctors as to why these children were dying, is it?

A. Yes.

Q. Now having promised that we
would deal with a meeting on the mortality and
morbidity conferences we went to another one.

Could you turn with me now to the
third section of the book which is the ward meeting
section - I am sorry, it is the fourth section of the
book. 4A Ward Meeting Book, and on page 175 of the
volume was a note of another meeting: August 5, 1980,



E.3

1

2

Phyllis, Sue Nelles and Sui.

3

4

Do you recall being at a meeting
with Phyllis and Miss Nelles?

5

A. Yes.

6

Q. On August 5th?

7

A. Yes.

8

10

Q. And the second item apparently
of discussion at that meeting as it is recorded is
that you discussed personal team problems re arrests
and causes of death.

11

12

Do you have any recollection of that
discussion on August 5th, 1980?

13

A. Not too much.

14

Q. Can you tell me what you do
recall, please?

15

16

A. Well, I think most of the time
we discussed about the stress we were going through.

17

Q. Yes.

18

A. On our teams.

19

20

Q. What was the cause of the
stress as you understood it at that time?

21

A. Because the deaths seemed to
be happening when we were working on nights.

22

Q. Yes.

23

24

25

A. And all the time with our teams



E.4

1

2

and not with other teams.

3

4

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8

Q. Does that suggest then if not by the end of July at least by the end of the first week in August you were aware that there was cause for concern that the deaths were happening in the presence of your team and at night. Is that a fair inference to draw from the note of the discussion on August 5th?

9

A. Yes.

10

11

12

13

Q. Okay. Was that meeting on August 5th the first time that you can recall anyone expressing concern about the coincidence of deaths with your team and deaths in the middle of the night?

14

A. Yes.

15

16

Q. Okay.

A. With our own teams, within our own teams.

17

18

19

20

21

22

23

24

25

Q. Yes. And from that time through to the end of August would it be fair to suggest that that kind of discussion and conversation went on fairly constantly among you, although not necessarily in formal meetings? As each child died would you not say to each other, "Gosh, there's another one when our team was on; that child died in the middle of the night as well."?



E.5

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A. We might have.

3

Q. Do you have any recollection of

4

it?

5

A. No.

6

Q. Now we have got to find this

7

great mortality meeting. September 5th, on page 7 of

8

the first section, Mrs. Scott. Mortality rounds,

9

September 5, 1980, you say you were not at that

10

meeting. It appears that Drs. Rowe and Contreras
were there.

11

Did you similarly read the note of

12

this meeting in the communications book at some point?

13

A. Yes, probably I did.

14

Q. And probably shortly after the

15

date of the meeting or when the note appeared?

16

A. Yes.

17

Q. Perhaps you would just like to

18

cast a quick glance over that now, Mrs. Scott. It
occupies three or four pages I am afraid, and then

19

perhaps you will tell me upon reading that what

20

impression did you form as to the cause of deaths on
the wards in the months of July and August?

21

You have read through the notes,

22

Mrs. Scott?

23

A. Yes.

24

25



E.6

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Q Can you remember now what impressions or conclusions you formed when you first read that note? Did you find it reassuring?

A Yes. We sort of accepted the explanation.

Q I am sorry, you found?

A We accepted the explanation.

Q You accepted the explanation that the children's deaths were the result of their physical conditions?

A Yes.

Q And their anatomical deformities?

A Yes. That is why we discussed about having a mini ICU in 4A so that we could look after the patients more - better.

Q I take it you regarded it as something of a relief to know that Dr. Rowe considered that these deaths were not attributable to any failure of nursing skills?

A That's right.

Q Of course. Now there was another meeting later in the month, and perhaps I could just ask you to take a look at that while on the thing. Page 16 of the manuscript, same section, Mr. Commissioner.



E.7

1

2

Mortality rounds, September 26th.

3

Could you just take a look at that note for me as well,
4 please, because that one also goes on for two or
5 three pages.

5

6

If you would just glance over it
and refresh your memory as to what you understood to
7 have been said. Is it fair, Mrs. Scott, that the
8 note of the second meeting which I take it you read
9 in the normal course of looking at the communications
10 book - is it fair that the message of the second
11 meeting appears to have been once again that these
12 children who died were terribly sick and that was why
13 they died and that you nurses have nothing to be
14 concerned about; nothing to blame yourselves for? Is
that the message you got from that note?

15

A. Yes.

16

Q. Did that provide you with

17

further reassurance that there was nothing missing in
18 your nursing skills?

18

A. Definitely.

19

Q. Did the other nurses on the

20

floor seem to take similar reassurance from the
21 mortality and morbidity round meetings in September?

21

22

A. Yes.

23

Q. Now we know as you have said

24

25



E.8

1

2

that your team leader, Mrs. Trayner, got married at
the end of August.

3

4

Did you go to her wedding by the way?

5

A. No.

6

Q. Were you invited?

7

A. No.

8

Q. She was away following the day
shift on August 28th until the long night shift of
September 24th, and if you needed to you could check
back in the WIN sheets.

10

11

In that period of almost four weeks
I tell you, Mrs. Scott, one patient died. That is to
say Laurette Heyworth who died at 8:30 in the morning
on September 2nd. She is not on the chart. Her
death was not regarded by the Atlanta people as in
any way suspicious.

12

13

14

15

16

You were working the long day shift
on September 2nd?

17

18

A. Yes.

19

Q. She died about an hour after
that shift started?

20

21

A. Yes.

22

Q. Do you recall if she was your
patient on that shift? I haven't been able to
establish that.

23

24

25



E.9

1

2

A. No.

3

4

Q. She was not? Do you have any recollection of the events leading to her death? She was an older child you remember?

5

6

A. Yes, she was in Room 23.

7

8

Q. Yes. Did you have any view as to whether her death was expected or not?

9

A. I think there was a no 25 Code sign.

10

Q. There was a do not resuscitate?

11

A. No, do not resuscitate, yes.

12

13

Q. Does that suggest to you that her death was not at all unexpected?

14

A. Yes.

15

16

17

18

Q. All right. Now after the death of Laurette Heyworth on September 2nd at 8:30 in the morning there was not another death on Wards 4A or 4B until the night of September 24th-25th and Brian Gage died that night. Do you recall that?

19

A. Yes.

20

21

Q. You were on long night duty that night?

22

A. Yes.

23

24

25

Q. And indeed for the first time we now have a patient for whom you were assigned to



E.10

1

2

care I think. You were in charge of Brian Gage the
night he died, weren't you?

4

A. Yes.

5

Q. He was in Room 418?

6

A. Yes.

7

Q. And that was Mrs. Trayner's
first shift of duty since her wedding as I remember it?

8

A. Yes.

9

Q. Indeed as the WIN sheets show.

10

Is that your recollection too?

11

A. Yes.

12

Q. I want to show you the

13

assignment book if I may, Mrs. Scott, and have you
confirm something for me. You are getting loaded up
with books over here. I will take them away in a
moment.

15

16

On Wednesday, September 24th, the

17

long night assignments were: Miss Nelles was in charge
as acting team leader.

18

19

A. Yes.

20

Q. Mrs. Trayner had four patients

21

in Room 418 and you had one patient in 418 and six in
421?

22

A. Yes.

23

Q. Mrs. Christie was also on duty

24

25



E.11

1

2

and she had seven patients, four of them in 425, two
in Room 426 and one in 423?

3

4

A. Yes.

5

Q. Your one patient in 418 was

6

Brian Gage, was he not?

7

A. Yes.

8

Q. And it is fair then that between

9

you and Mrs. Trayner all of the five patients in
Room 418 were covered, weren't they?

10

A. Yes.

11

12

13

14

15

16

17

18

19

20

21

22

23

24

25



BmB.jc
F

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Q. She had four of them, you had
Brian Gage?

A. Yes.

Q. Now, Brian Gage wasn't on
constant care nursing obviously, you had a lot of
patients somewhere else that night?

A. No.

Q. He was not on constant
care nursing, he wasn't on shared care nursing?

A. No.

Q. Just standard routine nursing
care for that child?

A. Yes.

Q. Recognizing that you had six
patients in Room 421 and only one patient, Brian Gage,
in Room 418, can you recollect for me roughly how
you allocated your time between those two rooms that
night, where did you spend the majority of your time?

A. Half and half.

Q. Half and half?

A. Yes.

Q. You were in 418 with Gage as
much as you were in 421 with six other patients?

A. Yes, because he was vomiting
all the time.



F.2

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Yes. Was anyone else looking after children in Room 421 or did you have them all in there? I think you had all the patients in Room 421.

A. Yes.

Q. Who was feeding them for you?

A. I was.

Q. You were feeding them?

A. Yes.

Q. That I take it takes some time?

A. Yes.

Q. All right. Mrs. Trayner had no patients other than in Room 418?

A. That's right.

Q. Do you have any recollection as to whether she was in Room 418 with any frequency or for any lengthy periods of time that night?

A. She was there most of the time.

Q. Most of the occasions when you were in the room was she there?

A. Yes.

Q. Do you recall leaving the room at any stage and her being there?

A. No.

Q. What did you do for breaks that night?



F.3

1

2

I went the usual time after I
fed the babies.

4

Okay, tell me, what's the usual
time? First there is a coffee break, isn't there, in
the early part of the shift?

6

Yes.

7

8

What time do you usually take
your coffee break?

9

A. About 10, 10:30.

10

All right.

11

12

A. It all depended on how many
babies I had to feed.

13

14

Q. Of course, yes. Do you have
any recollection as to when you took your coffee break
that night?

15

A. No.

16

17

Q. Do you have any recollection
that it was anything other than the usual time?

18

A. It was the usual time.

19

Q. It was the usual time?

20

A. Yes.

21

Q. So, 10, 10:30, in that area?

22

A. Yes.

23

Q. And as I understand it later in
the shift it was the practice to take a lunch break?

24

25



F.4

1

2

A. Yes.

3

Q. And a lunch break lasted, what,
about 45 minutes?

4

5

A. Yes, or sometimes more if we are
not busy but if we are busy we take less.

6

7

Q. Yes. On the average about 45
minutes?

8

A. Yes.

9

10

Q. Do you recall what time you took
your lunch break that night?

11

A. No.

12

Q. What time do you normally take
a lunch break?

13

A. About 1:30.

14

15

Q. All right. Do you have any
recollection that you took your lunch break at anything
other than the normal time that night?

16

17

A. No.

18

Q. I wonder, Mr. Registrar, if you
could put the Brian Gage chart in front of Mrs. Scott,
please.

19

20

21

Now, Mrs. Scott, it may be of
assistance to you in recalling the events of the night
but your nursing note for that long night shift
starting September 24th is on page 65 of the chart.

22

23

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F.5

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First of all, I am right in thinking
am I not, Mrs. Scott, that Brian Gage was scheduled
for surgery the next day?

A. Yes.

And the surgery had been
scheduled on the sudden, a vacancy had become available
in the OR?

A. I don't remember that but he
was scheduled for the next morning.

Q. He was scheduled for surgery the
next morning. Can you give me please, with the
assistance of your nursing note if necessary, your
best recollection of that child's condition and course
in the early part of the shift?

A. Well, according to my notes he
was in no respiratory distress and his vital signs
were stable. He was pale but not cyanosed.

Q. All right. Now, you say
according to your notes-- that is indeed what the
notes say. Is that what your recollection is also?

A. Yes.

Q. That he had stable vital signs,
didn't even have any trouble with his respiration,
pale but he is not turning blue or anything of that
sort?



F.6

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2

A. No.

3

4

Is it fair to say that in the early part of the shift the child's only difficulty appeared to be persistent vomiting?

5

6

A. Vomiting, yes.

7

8

Q. And he was vomiting whenever he was fed, was he not?

9

10

A. Yes.

11

Q. Was that a matter of concern for you?

12

A. Yes.

13

Q. Why was that a matter of concern?

14

A. Well, I didn't like him vomiting all the time.

15

Q. Obviously.

16

A. So, I told the team leader and the team leader told the doctor and he said, no, try to feed him because he wanted to push some calories into him for his OR the next morning.

17

18

19

Q. I see. He wanted to get some nutrition into the child, he was going to surgery?

20

A. Yes.

21

22

Q. So, your instructions were to feed him if you can and if you can to keep the food down?

23

24

25



F.7

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2

A. Yes.

3

Q. All right. And that I take it

4

was a rather frustrating thing to try to do that night,

5

he was vomiting every time you fed him?

6

A. Yes.

7

Q. Other than the vomiting however

8

did the child otherwise appear to be stable?

9

A. Yes.

10

Q. By that I don't mean was he well,

11

obviously he wasn't terribly well but he was stable
was he not?

12

A. Yes.

13

Q. Who gave the child his last

14

feeding before his arrest?

15

A. Phyllis Trayner.

16

Q. I'm sorry?

17

A. Phyllis Trayner.

18

Q. Do you recall what time that

was?

19

A. No, I do not.

20

Q. How did it come about that

Mrs. Trayner fed him?

21

A. Well, he was vomiting all the

22

time and sometimes it works if you get another nurse

23

to feed the baby hoping that he will keep all of his

24

feed down.

25



F.8

1

2

3

Q. Yes. So, did you ask her to
feed the child?

4

A. Yes.

5

A. Were you there when she fed him?

6

A. I don't recall.

7

A. At approximately what time was
that?

8

9

A. When I came back from lunch she
wasn't feeding him, so, she must have fed him when I
was at lunch; I don't recall.

10

(2)

11

A. Okay. Well, did you go for
lunch before the child had been fed for that last time?

12

13

A. I don't recall.

14

15

Q. When you left for lunch, and
let's assume for the moment subject to checking
anything we can, that you left about the normal time,
about 1:20?

16

17

A. Yes.

18

19

Q. When you left for lunch was
anybody in the room with Gage and the other children?

20

A. Yes.

21

Q. Who was there?

22

A. Phyllis.

23

Q. Was she feeding the child
Brian Gage at that time?

24

25



F.9

1

2

A. I don't recall.

3

Q. You don't recall. Do you

4

recall whether it was before you went for lunch that
you had asked her if she would feed him?

5

A. I don't.

6

Q. Well, do you recall his being
fed after you came back from lunch?

7

8

A. I don't know, I don't recall,

9

I'm sorry.

10

Q. At page 104 of the chart we've

11

got the medication sheet, Mrs. Scott. That discloses;
does it not that you gave to the child, the lower
right-hand quarter of the page, at 9 o'clock in the
evening aldactone; do you see that?

12

13

14

A. Yes.

15

Q. And then at 10 o'clock, what's

16

that, sodium what?

17

A. Oh, it is just for the eyes.

18

Q. It is just for the eyes. That

19

was an ointment for the eyes, was it?

20

A. Yes.

21

Q. Those were the only medications

that you administered to the child that night?

22

A. Yes.

23

THE COMMISSIONER: Is that 10 o'clock

24

or 8 o'clock?

25



F.10

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2

MR. LAMEK: I think at 2200 hours
is probably 10 o'clock, sir.

4

THE COMMISSIONER: Yes, all right.

5

MR. LAMEK: Q. Did you administer
that medication and that treatment at the hours that
you have recorded?

7

A. Yes.

8

9

10

11

12

Q. At page 133 of the chart on
the flow sheet your signature appears only once on
that page against 0300. It otherwise appears, does
it not, that vital signs were taken at 8 o'clock,
10 o'clock, midnight and 2 o'clock?

13

A. Yes.

14

Q. Did you take those vital signs?

15

A. Yes.

16

Q. And so recorded them?

17

A. Yes.

18

19

20

Q. Now, the pulse rate of 49 that
is recorded at 0300 hours, was that the pulse rate
of the child immediately prior to his arrest when you
first saw him getting into trouble?

21

A. Yes.

22

23

24

25

Q. Which in fact we know from the
chart was a little after 3 o'clock, about 3:20 as I
recall it?



F.11

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2

A. Yes.

3

Q But you noted it at about three?

4

A. Yes.

5

Q Okay. Well, give me your best recollection of what happened with that child that night and the events leading up to his arrest, Mrs. Scott?

8

A. I went into the room about that time of 3, 3 o'clock.

10

Q Went into the room at about three?

11

A. Yes.

12

Q Yes.

13

A. And I looked at him and he looked a bit uncomfortable, I thought he needed burping.

15

THE COMMISSIONER: Can you go just a little bit more slowly. I think I am having difficulty hearing. I don't know whether anybody else is. None of the amplification comes my way, so, I am dependent upon the human voice and rather elderly ears. Could you just speak up a little bit and a little bit more slowly.

21

THE WITNESS: I'm sorry.

22

THE COMMISSIONER: Thank you.

23

Now, you went into the room at

24

3 o'clock?

25



F.12

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THE WITNESS: About five past three
or 3 o'clock, and I looked at the baby and he was a
bit uncomfortable and I thought he needed burping. So,
I sat him up inside the isolette.

MR. LAMEK: Q. He was in an isolette,
was he?

A. Yes.

Q. All right. So, you sat him up
to burp him?

A. Yes.

Q. All right.

A. And he did burp. He sort of
opened his eyes and looked around for the first time
that night and then I put him back and make him
comfortable and when I was just getting ready to leave
the room I noticed his respiration.

Q. I'm sorry, you were just getting
ready to leave the room and what?

A. I was just, you know, sort of
settling him back and I was going to go out of the
room to go and look at my other patients in the other
room.

Q. Yes.

A. And I thought the monitor sort
of made noises. So, I went back to him and listened



F.13

1

2

to him and he sort of was worse.

3

4

Q Okay. You saw the monitor,
what was the monitor doing?

5

A It was buzzing.

6

Q The monitor was buzzing?

7

A Yes.

8

Q Does that mean that his heart
rate had dropped?

9

A Coming down, yes.

10

Q From the rate set on the monitor?

11

A Yes.

12

13

Q So, you listened to his heart
rate with a stethoscope?

14

A Yes.

15

Q And what did you hear?

16

17

A Well, it was very faint and went
right down, so, I shouted for Susan Nelles, she was
the team leader.

18

Q Yes.

19

A And Phyllis was with me and she
came in and had a look.

20

21

THE COMMISSIONER: I'm sorry, you
shouted for Susan Nelles who was the team leader?

22

23

THE WITNESS: Yes, she was outside the
room.

24

25



F.14

1

2

THE COMMISSIONER: Was Mrs. Trayner ...

3

THE WITNESS: She was in the room

4

with me.

5

THE COMMISSIONER: In the room, all

6

right.

7

MR. LAMEK: Q. And did Miss Nelles
come into the room?

8

A. Yes, she came in and then we
told her you had better get a doctor.

9

10

Q. All right. Did Mrs. Trayner

11

come over to the child's bed?

12

A. I don't know, she was with me,
she was beside me, standing beside me.

13

Q. Yes. And then what happened?

14

A. And then I think we called the
arrest team and then I can't remember.

15

16

Q. And the resuscitation effort

17

followed I take it?

18

A. Yes.

19

Q. Now, on page 65 of your note

20

in the chart, Mrs. Scott, in your note, the second
paragraph of that note you say:

21

"Babe was put on his left side all

22

evening and night. When I sat him up

23

to burp him gently he was alert and

24

25



F.15

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"in no respiratory distress. About five minutes after putting the baby down, 0320 hours, his apex fell to 49 and weak. CPR was initiated and a Code 25 was called."

Now, what I want to do if I can with you, Mrs. Scott, is try to fix the relationship of events, the chronology of events. You noticed that this child's apex was falling at about 3:20 on the morning?

A. Yes.

Q. And you said in your note that was about five minutes after you had burped the child and put him down again?

A. Yes.

Q. Which would set that event at about 3:15 I take it?

A. Yes.

Q. All right. And how long had you been in the room with him before you sat him up to burp him?

A. Not too long, about five minutes.

Q. Okay. So, perhaps you went into the room then at about 3:10?

A. Yes.



F.16

1

2

3

4

Q All right. I take it that by
3 o'clock in the morning you had already had your
lunch?

5

A Yes.

6

7

Q Do you recall how long you had
been back from lunch when this event occurred?

8

A I don't. I spent some time in
the other room with the other six babies.

9

10

Q Before coming into 418 to see
Brian Gage?

11

12

A Yes, I went and had a look and
then went to the other room and did some nursing care
there.

13

14

Q Okay, you came back from lunch,
you looked in on Brian Gage?

15

A Yes.

16

17

Q And then went to the other room
to look at your six patients there?

18

A Yes.

19

20

Q And then came back into Brian
Gage's room?

21

A Yes.

22

23

24

25

Q Is it of any assistance in
helping you place the time you got back from lunch,
Mrs. Scott, that you recorded taking vital signs at



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Scott, dr.ex.
(Lamek)

6822

F.17

1

2

2 o'clock in the morning; that's on page 133.

3

A. 2 o'clock.

4

Q. Yes. You show that you

5

recorded vital signs at 2 o'clock.

6

7

8

9

10

11

12

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G
DM/cr

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A. Well I could take the signs
10 minutes past..

Q. Either 10 minutes to or 10
minutes past, sometime in that area?

A. Yes.

Q. Do you recall whether when
you came back from lunch and you went in to see
Brian Gage, did you take his vital signs at that
time, do you remember?

A. When?

Q. When you got back from lunch?

A. I don't recall. Either I
came back, I had my lunch at 1:15 or something and
then I came back and did my signs at two, or I
had my lunch after that.

Q. After 2 o'clock?

A. Yes, sometimes I do. Because
remember I had all those babies to feed in the other
room.

Q. Yes I do. But if you had your
lunch by 3 and you fed all those babies as well
between 2 and 3 there wasn't much time for lunch,
was there?

A. Most probably I had it earlier.

Q. I would have thought so.

Is it not likely, Mrs. Scott, that the 2 o'clock



2
1
2 vital signs which may have been anywhere from 10 to
3 2 until 10 past 2 were taken when you looked in on
4 the child when you came back from lunch?

5 A. Yes, most probably.

6 Q. You looked in on him, took
7 his vital signs, and he seemed perfectly all right
8 I take it?

9 A. Yes.

10 Q. You went out to look after
11 your other children and got to him about 10 past

12 A. Yes.

13 Q. I suggested to you that that
14 is likely, do you have a recollection of it that
15 that is what happened?

16 A. I have a recollection of
17 going in and looking at him and burping him.

18 Q. But that was sometime after
19 3 as we know?

20 A. Yes.

21 Q. And you said a moment ago that
22 you may have taken your lunch at 1:15 or 1:30 or
23 something of that sort?

24 A. Yes.

25 Q. Is it your recollection that



Scott, dr.ex.
(Lamek)

6825

1
2 that is what you did, that some time around the
3 usual time you went off for lunch?

4 A. Yes.

5 Q. And when you went for lunch
6 who was with the child?

7 A. I don't recall.

8 Q. When you came back from lunch
9 who was with the child?

10 A. I am not quite sure but
11 Phyllis was there, she was the only one there.

12 Q. That night, until the time
13 that child went into arrest, do you recall seeing
14 anybody else with him other than yourself, or perhaps
15 Mrs. Trayner, or in Room 418 at all?

16 A. Well, Susan came in a couple
17 of times to look at him because he was vomiting.

18 Q. Were you there on those
19 occasions?

20 A. Yes.

21 Q. And did anyone else to your
22 recollection go into the room that night?

23 A. No.

24 THE COMMISSIONER: At some point,
25 Mr. Lamek.

MR. LAMEK: Oh yes, we take it earlier



Scott, dr.ex.
(Lamek)

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these days, yes. Well, this is as good a time as
any.

THE COMMISSIONER: Yes. We will take
20 minutes.

~~THE COMMISSIONER: Yes.~~

~~THE COMMISSIONER: Yes.~~

THE COMMISSIONER: Yes, Mr. Lamek.

MR. LAMEK: Thank you, sir.

Q. Mrs. Scott, when we broke,
we were trying to plot the chronology of the two
or three hours prior to the arrest of Brian Gage.
As I understand it we have at least a couple of
reasonably fixed points. That is to say we have
from your nursing note, page 65 of the chart, that
the baby apparently got into trouble at about 3:20,
about five minutes after you sat him up to burp him
and you settled him down again, and we know when that
occurred. We also know from the flow sheet that
you recorded the child's vital signs at or about
2 o'clock in the morning.

A. Yes.

Q. If I recall, I would like
to be clear about the preceding events, the events
before 2 o'clock or thereabouts and the intervening
events if we can between those vital signs being



1

2

recorded and the child getting into trouble.

3

Forgive me, I may have asked you some of these

4

questions before but I have to ask them again.

5

Do you recall what period of time had elapsed

6

between your coming back from lunch and Baby Gage

7

getting into trouble at about 3:20?

8

A. About an hour.

9

Q. About an hour?

10

A. Or 50 minutes.

11

Q. An hour, or a little less or
a little more?

12

A. Yes.

13

Q. Does that mean that if

14

indeed the child got into trouble at about 3:20

15

in the morning, you got back from lunch at what,
2:10, 2:15, 2:20, something of that sort?

16

A. Ten or 15 minutes past 2 to

17

take his signs.

18

Q. And would it be at that time

19

that you took the child's vital signs that you
recorded as the 2 o'clock vital signs?

20

A. Yes.

21

Q. Do you have any recollection

22

as to whether you took the normal length lunch

23

break that night, 45 minutes being the average

24

25



1

2

lunch break as you have told me?

3

A. Yes. There is no reason

4

5

Q. I am sorry?

6

A. There is no reason for me to

7

take less than 40 minutes or more than 40 minutes.

8

Q. So your recollection is you

9

took approximately 45 minutes, perhaps a little more

10

or perhaps a little less?

11

A. Yes.

12

Q. And if that is so that would

13

have you going off for lunch I take it somewhere

14

between 1:30 and 1:45 something of that sort?

15

A. Yes.

16

Q. I'm sorry a little earlier

17

than that 1:15 to 1:30?

18

A. Yes.

19

Q. 1:30 would bring you back at

20

about 2:15?

21

A. Yes.

22

Q. You would take the vital

23

signs and then go off to look at the other children?

24

A. Yes.

25

Q. I ask you again when you left

for lunch, do you have any recollection as to



1
2 whether Mrs. Trayner was in the room?

3 A. I don't.

4 Q. When you came back from lunch
5 do you have any recollection as to whether Mrs.
6 Trayner was in the room?

7 A. No.

8 Q. Do you recall whether you had
9 any understanding as to whether Mrs. Trayner was to
10 do anything with or for Baby Gage while you were at
11 lunch?

12 A. No.

13 Q. Is it your recollection that
14 she fed him at your request before you went to
15 lunch, did you see her feed him?

16 A. I don't know whether she fed
17 him when I was at lunch or when I came back looking
18 at Gage and went to the other room.

19 Q. You think, you are telling
20 me you don't recall seeing her feeding him first
21 of all?

22 A. I recall seeing her but not
23 the time.

24 THE COMMISSIONER: I am sorry, I missed
25 that.

THE WITNESS: Not the time.



Scott, dr.ex.
(Lamek)

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1
2 THE COMMISSIONER: You recall seeing
3 her feeding the baby, is that right?

4 THE WITNESS: Yes, but not the correct
5 time.

6 THE COMMISSIONER: Can you put it
7 into this chronology whether it was before you
8 went to lunch or after you came back from lunch?

9 THE WITNESS: Most probably she was
10 feeding the baby when I finished my lunch and I was
11 in the other room before 3.

12 THE COMMISSIONER: Before --

13 THE WITNESS: Before 3:15, before I
14 went back.

15 THE COMMISSIONER: Yes, but you recall
16 seeing her feeding the baby, is that right?

17 THE WITNESS: Yes.

18 THE COMMISSIONER: So obviously you
19 must have been in the room at the time?

20 THE WITNESS: Yes, but I went in
21 there and came out again.

22 MR. LAMEK: Q. You will have to bear
23 with me for a moment, Mrs. Scott. Mrs. Scott, do
24 you recall being interviewed by the police about
25 Baby Brian Gage?

A. Yes.



Scott, dr.ex.
(Lamek)

1
2 MR. LAMEK: Mr. Commissioner, I don't
3 have copies of this statement and it may become
4 necessary to mark it.

5 Q. Mrs. Scott, I have a record
6 of what you are alleged to have told the police with
7 respect to Brian Gage. You have looked over these
8 statements and summaries, have you not?

9 A. Yes.

10 Q. You are recorded as having
11 said to the police:

12 "I think it was Phyllis who fed him
13 for me while I went on a break. I
14 came back and Phyllis had looked after
15 him".

16 Do you recall having said that to the
17 police?

18 A. No.

19 Q. You have no recollection of
20 it?

21 A. No.

22 Q. Do you have any present
23 recollection as to whether Mrs. Trayner looked after
24 Brian Gage while you were out on your break?

25 A. My memory at that time was
fresher than now.



1
2
3 It may be at some stage we
4 may have to hear from the officer who interviewed
5 you. Do you have any reason to think that he has
6 misstated what you told them when he records you

as always said.

7 "I think it was Phyllis who fed him
8 me while I went on a break, I
9 came back and Phyllis had looked after

10 Do you have any reason to think that
11 he is contradicting what you have said?

12 A. No.

13 But you have no present
14 recollection of what happened while you were on your
15 break?

16 A. No.

17 THE COMMISSIONER: It is a little
18 different now, Mrs. Scott, because I thought you
19 said a moment ago that you saw her actually feeding
20 the baby. Do you remember now seeing that?

21 THE WITNESS: Yes. I remember seeing
22 that but not whether when I was at lunch or after
23 I had lunch.

24 THE COMMISSIONER: It is not quite the
25 same as what you said to the police. You said when



1
2 you came back that Phyllis had looked after him,
3 but now you say that you can actually remember her
4 feeding the baby, you just don't know what time,
5 isn't that right?

6 THE WITNESS: Yes.

7 THE COMMISSIONER: I don't know
8 whether I am making myself clear to you, I am not
9 too sure that you realize the distinction. Which
10 was it, had Phyllis finished feeding the baby, or
11 was she still feeding the baby?

12 THE WITNESS: She was sitting on the
13 chair feeding the baby.

14 MR. LAMEK: Q. And when you got back?

15 A. When I got back, at some point
16 when I got back in the room and went out again to
17 the other room.

18 Q. You are recorded also as
19 having said to the police with respect to Brian
20 Gage:

21 "We called a 25 and the team came with
22 Dr. Jedeikin. He asked me what happened
23 and I explained to him to explain when
24 I went for lunch Phyllis took care of
25 the baby and was supposed to feed him.
I came back after lunch."



1
2 Do you recall having said that to the
3 police?

4 A. Yes.

5 Q. And was that true?

6 A. Yes.

7 That Phyllis did indeed take
8 care of the baby while you were at lunch and was
9 supposed to feed him while you were at lunch, is that
your recollection now?

10 A. Yes.

11 Q. Do I understand you to be
12 saying this morning that although you recall seeing
13 Phyllis actually feeding the baby, you don't know
14 whether that was as you were going for lunch or
when you came back from lunch, is that fair?

15 A. Yes.

16 Q. But while you were away, is
17 it your recollection, and tell me if it is not
18 please, is it your recollection that Mrs. Trayner
19 who had children in the room was going to look
after Gage and feed him?

20 A. Can you say that --

21 Q. Is it your recollection,
22 as apparently you told the police, that while you
23 were out at lunch Mrs. Trayner was going to look
24
25



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Scott, dr.ex.
(Lamek)

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after Baby [redacted] and feed him?

3

Yes.

4

Is that your recollection?

5

Yes.

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Then you got back from lunch and
it happened then that you saw Mrs. Trayner feeding
him?

Q. She was still feeding the baby
and then I left the room to go to the other room.

Q. Is it your recollection that
when you went into the room on your return from lunch,
at that time notwithstanding that she was feeding him
you took his vital signs?

A. I could not take his vital
signs while she was feeding the baby.

Q. I would not have thought so.
So one of those recollections I suggest to you has to
be an error. Does it not? Either she was feeding him
when you looked in, in which case you didn't take
his vital signs then, or she was not feeding him when
you looked in, in which case as you thought earlier
you did take his vital signs then.

Now can you help us?

A. Most probably she fed the baby
when I was at lunch because I could take
his signs --

Q. Not while he was being fed?

A. No.

Q. I would not have thought so.



Scott
dr. ex. (Lamek)

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Is it possible then Mrs. Scott, that
your recollection of seeing Mrs. Trayner feeding the
child was that it was happening as you were leaving for
lunch?

A. Yes.

Q. That is possible?

A. Yes.

O. I know it is difficult to remember
it in precise sequence, but we do have certain
objective facts we have got to take into effect like
the vital signs being taken at or about 2:00, do we
not? Yes.

Now, when you came back, and you took
those vital signs at or about 2:00, they are recorded
on page 133 and they show a heart rate of 140 per
minute and a respiration rate of 60 per minute. Is
it fair to say that those appear to be consistent with
the vital signs recorded earlier on your shift and
indeed on the preceding shift for the child?

A. Yes.

O. Did he appear to be essentially
the same as when you had left him for lunch?

A. Yes.

O. He still appeared to be stable,
did he?



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Q. And then we know about 3:15 or 3:10 you came back into the room and you saw him there. You said he looked a little uncomfortable and you decided you would sit him up and burp him and did that?

A. Yes.

Q. He looked around and he seemed alert?

A. Yes.

Q. And you settled him down again and five minutes later you noticed from the monitor that his heart rate had dropped to about 49.

A. Yes.

Q. So far as you were aware was that a sudden drop in the baby's heart rate?

A. Yes.

Q. An unexpected drop in his heart rate?

A. Yes.

Q. Prior to 3:20 in the morning had there been anything in that child's course during the shift that led you to think that he might be at serious and immediate risk of going into cardiac arrest?

A. Apart from his vomiting, no.



1
2 Q. When you noticed that the heart
3 rate had dropped to 49 as you recorded, was there any-
4 one else in the room with you at that time?

5 A. Phyllis was.

6 Q. And you called out for Susan
7 Welles to come?

8 A. Yes.

9 Q. Because she was a team leader
10 that night?

11 A. Yes.

12 Q. And then as we have said a
13 code was called, the arrest team arrived and
14 resuscitation efforts got under way.

15 The arrest note which is on page
16 66 of the chart, Mrs. Scott, seems to record that CPR
17 was started at 3:27, and at that time the apex had
18 dropped further down to 30 to 35. Do you see that?

19 A. Yes.

20 Q. Were you present during the
21 resuscitation effort on this child?

22 A. Yes.

23 Q. What were you doing, do you
24 recall?

25 A. I don't.

Q. Do you recall who else was present



1
2 other than the members of the arrest team? What
3 other nurses were present?

4 A. No. I just recall the doctor.

5 Q. And that was Dr. Jedeikin?

6 A. Yes.

7 Q. And Dr. Jedeikin afterwards asked
8 you what happened to the child, did he not?

9 A. Yes.

10 Q. And you told him as indeed we
11 read from the police statement and as you have now
12 confirmed to us the child seemed fine, about an hour
13 after lunch you picked him up to burp him, sat him up
14 to burp him, put him down, and very shortly there-
15 afterwards his heart rate dropped and he arrested?

16 A. Yes.

17 Q. This baby could not be revived,
18 of course, and was pronounced dead at 4:00 in the
19 morning. Do you remember that?

20 A. Yes.

21 Q. It also appears from page 66 of the
22 chart that CPR stopped at 4:00.

23 A. Yes.

24 Q. Would you regard Baby Gage's
25 death as unexpected?

A. Well, I didn't anticipate his



6 1 death that night.

2
3 Q. Mrs. Scott, do you recall any
4 other children in the period about which we are
5 talking (that is to say July of 1980 to March
6 you recall any other children who
7 45 minutes, an hour, an hour and a quarter,
8 after you came back from a break?

9 A. They all seemed to take a turn
10 for the worse after we came back from breaks.

11 O. I'm sorry, I didn't catch that.

12 A. They all seemed to get worse
13 after we came back from...

14 O. They all seemed to get worse
15 after you came back from breaks?

16 A. Yes.

17 Q. Can you remember any other
18 particular child other than Gage who took that turn
19 for the worse about an hour after you came back from
20 break?

21 A. Estrella.

22 O. Estrella was another one, was
23 she?

24 A. And Gardner.

25 Q. Okay. Let's go forward to those
in just a moment, but maybe we could just look at the



1
2 intervening deaths (at least those on our chart),
3 and I know you don't have much recollection of many of
4 these children but let's just touch upon them as we
5 go through.

6 Following the death of Brian Gage you
7 were not on duty for the death of Richard McKeil on
8 October 15th or for the death of Antonio Adamo on
9 October 19th.

10 I take it you learned of those deaths
11 when you next came back on duty after each respective
12 one?

13 A. Yes.

14 Q. Did you have enough information
15 about either of those children to form a view as to
16 whether death was expected or unexpected?

17 A. No.

18 Q. Did you form any impression from
19 other nurses on the floor or from doctors as to
20 whether either of those deaths were unexpected or
21 surprising?

22 A. No.

23 Q. That is true of both Adamo and
24 McKeil?

25 A. Yes.

Q. Similarly you were not on duty



8 1
2 when -- let's eliminate these -- when Real Gosselin
3 died on December 18th or when Stephanie Lombardo
4 died on December 23rd? Moving back up the list to
5 December 9 when John Onofre died on Ward 4B you were
6 on duty on Ward 4A.

7 Do you have any recollection of
8 any of those children, notwithstanding you were not
9 present on the ward at the time of their deaths?

10 A. No.

11 Q. You were on duty on Ward 4A for
12 the long night November 16-17 when Matthew Lutes died.
13 Again you were not assigned to care for that child
that night. Miss Nelles was.

14 Do you have any recollection of that
15 patient, Matthew Lutes?

16 A. No.

17 Q. Or of the events of the night of
18 his death?

19 A. No.

20 Q. You were on duty when Darcy
21 MacDonald died on December 13th, in the early hours
22 of December 13th. And again you were not assigned to
care for that child.

23 Do you have any recollection of that
24 child and the events the night of her death?
25



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A. No.

3

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Q. Now, Jesse Boulanger died in the early evening of December 28. Do you see that? At 8:16 in the evening. She had died in a room that is located on Ward 4B but am I right in thinking that Ward 4A and 4B were combined or merged over the Christmas-New Year period?

8

A. Yes.

9

10

11

Q. And although you were on duty notionally on 4A, in fact the whole cardiac unit was being treated as a single ward?

12

A. Yes.

13

Q. For that period, wasn't it?

14

A. Yes.

15

16

17

18

19

Q. And again you were not caring for that child. It was Susan Reaper's patient that night. But you and Mrs. Trayner and Susan Reaper had worked indeed the long day shift, had you not? The child died at 8:00 in the evening and you had gone off duty at about 7:30 I think.

20

A. Yes.

21

Q. And Nurse Reaper had been assigned to care for the child.

22

A. Yes.

23

Q. Do you have any recollection of

24

25



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10

2

Baby Belanger?

3

A. No.

4

Q. Or of the events of the latter
part of the shift shortly before he arrested and
died.

6

A. No.

7

8

Q. Well then let's go to Janice
Estrella. The night that Janice Estrella died you
were assigned to provide constant nursing care for
her, were you not?

10

A. Yes.

11

12

Q. As indeed you had been the night
before.

13

A. Yes.

14

15

Q. Two nights in a row Janice
Estrella was on constant care and you were providing
it.

16

17

On the night of January 10 to 11,
Janice Estrella was in Room 423. Do you recall that?

18

A. Yes.

19

20

Q. She was alone in that room:
there was no other patient there, was there?

21

A. No.

22

23

Q. As we can see from the chart
the other nurses on duty on 4A that night were Phyllis

24

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Trayner, Marianne Christie and Janet Brownless, and
on 4B there was Bertha Bell, Debbie Harwood Jones,
Shirley Ann Parcels and Meredith Frise. Do I have
that correctly?

A. Yes.

Q. Susan Nelles was not working
that night.

A. No.

Q. Now this is the first case we
have looked at where you were assigned to constant
care nursing for any of these children at the
time of death. I want to ask you something about
constant nursing care first if I may.

We have heard evidence here, Mrs.
Scott, that only RN's are assigned to provide constant
nursing care on the cardiology service.

A. Yes.

Q. Is that true?

A. Yes.

Q. We have heard also that usually
a nurse who was providing constant nursing care was
relieved for breaks by another registered nurse.

A. Yes.

Q. Was that your experience?

A. Yes.



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12

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Q. When I say for breaks I don't mean

3

running across to the utility room to get a

4

bottle of something. I am talking about coffee

5

break.

6

A. Yes.

7

Q. Do you ever recall being relieved

8

an RNA when you were assigned to constant

9

nursing care?

10

A. Not for coffee breaks or lunch

11

Q. All right. Is the same true of

12

nursing care? If you were on shared nursing

13

care did you need to be relieved for breaks --

14

A. By an RN.

15

Q. By an RN? And do you remember

16

any occasion when you were doing shared nursing care

17

when an RNA relieved you for a break?

18

A. No.

19

Q. All right. Focussing on night

20

duty, was there one RN on your team -- there were

21

three RN's on your team: yourself, Mrs. Trayner

22

and Miss Nelles.

23

A. Yes.

24

Q. Were the regular RN's on that

25

team?

26

27



13

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2

A. Yes.

3

Q. From time to time someone else
might come on as a relief?

4

5

A. Yes.

6

Q. Of the three regular RN's on the
team was there one who relieved you more frequently
than others when you were on constant care or shared
care?

8

9

A. The team leader.

10

Q. And that I take it is a

11

perfectly normal thing.

12

A. Yes.

13

Q. Because a team leader very often
doesn't have patients assigned to herself.

14

A. Yes.

15

Q. And she is therefore free to
relieve you?

16

17

A. Yes.

18

Q. How would the team leader know

19

when you want a break?

20

A. I would let her know.

21

Q. You would let her know? All right.

22

Do you have to call her and ask to be relieved?

23

A. Yes.

24

Q. You have told us when you normally,

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roughly when you normally took your breaks at night:
10, 10:30 for coffee and 1:30 or thereabouts for
lunch.

A. Yes.

Q. Let's go back then to the night
Janice Estrella died, the night of January 10 to 11,
1981.

You were providing constant care for
her and she was the only patient in Room 423.

Perhaps, Mr. Registrar, we could have
the chart for Mrs. Scott?

Now your nursing note for the relevant
night is found at page 128, Mrs. Scott. Can you give
me, please, assisted if necessary by reference to your
note of that night, could you give me your best
recollection of the child's condition and course for
the first part of the shift until 2:40 in the morning?

A. She was -- her signs were
stable, but her respirations had been -- she had been
having trouble with respirations even before that
night.

Q. Yes.

A. But she was stable and she was
quiet. She was only irritable when you disturbed her
for nursing care.



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Scott
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6850

15 1
2 Q. If you disturbed her for nursing
3 would she get irritable?
4 A. She would cry, yes.

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Q. But otherwise did she appear reasonably well settled?

A. Yes.

Q. And calm? Now, you say she was restless with respiration, she was breathing fast, was she not?

A. Yes.

Q. And had been for a couple of days I think?

A. Yes.

Q. If one were to look back to your nursing note of the night before, I think it is on page 125, respirations 87 to 69, mostly in the 70s and 80s, remained tachypneic all night.

A. Yes.

Q. Fast breathing the night before. The day shift note on page 126 by Nurse Ganassin said the same thing, respiration remains tachypneic, and that continued on the night that she died.

A. Yes.

Q. But you record her apex as being 142 and 114 and regular throughout and strong.

A. Yes.

Q. But clearly Estrella was not



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a well baby, was she?

A. No.

Q. She was having this fast breathing, prolonged episode of fast breathing over a couple of days. She had an elevated temperature on the night of January 10, did she not?

A. Yes.

Q. It was slightly elevated. You record her at one point as being rather clammy or sweaty and a bit irritable you said when she was disturbed.

A. Yes.

Q. And indeed the child was sick enough to have been on constant care since January 7th, isn't that right?

A. Yes.

Q. Okay. Now, having so described her condition while you were with her on the night of January 10th, did her condition remain essentially the same from the beginning of the shift until she got into trouble at about 2:40?

A. Yes.

Q. So, in that sense, and I put it no higher than that, but in that sense she was stable, that is, her condition wasn't changing,



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WAS 121

A. No.

Q. Okay. I take it you saw
no indications of bradycardia until 2:40 in the
morning?

A. Yes.

Q. Am I right in saying that?

A. Yes.

Q. Okay. No sign of any drop
in blood pressure until 2:40 in the morning?

A. No.

Q. At any time prior to 2:40
in the morning, did you have any cause to be con-
cerned that Baby Estrella might not make it through
the night?

A. I had no immediate concern.

Q. Now, if one were to turn
back to page 126 in the chart, there is a note by
Dr. Tucker; that's on cardiac arrest.

At the bottom of the page -- well
there are two page 126s, interestingly, but the
first page 126 there is another note by Dr. Tucker
at the bottom of the page, that is the one I am
directing you to at the moment. It seems to be
Jan 10th, 1981, 2330, 11:30 at night. Do you see



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that I am referring to?

A. Yes.

Q. Do you recall Dr. Tucker
going into the child's room at 11:30 at night?

A. Yes.

Q. Do you know what brought
Dr. Tucker there at that time?

A. She just came in. It is not
unusual for them to come in before they settle, they
retire for the night.

Q. Okay.

THE COMMISSIONER: I'm sorry, I
missed that.

THE WITNESS: It is not unusual for
them to come in before they retire for the night.

THE COMMISSIONER: Yes. Dr. Tucker,
he would be a resident I take it?

THE WITNESS: Yes.

THE COMMISSIONER: He would be
spending the night --

THE WITNESS: I think she is a 'she',
sir.

THE COMMISSIONER: It is a she, I
beg your pardon.

THE WITNESS: I think she was the



1
I5 2 resident on call that night.

3 THE COMMISSIONER: Yes. And that
4 would mean staying in the Hospital?

5 THE WITNESS: Yes.

6 THE COMMISSIONER: On the ward?

7 THE WITNESS: Yes, yes.

8 THE COMMISSIONER: Not on the ward,
9 but wherever they stay.

10 THE WITNESS: Not on the ward, yes.

11 MR. LAMEK: Q. Dr. Tucker records at
12 11:30 the child's heart doesn't seem to be fevered,
13 respiratory rate is still elevated, chest is clear,
14 and I have to tell you that I can't read the next
15 word, can you help me?

16 A. Abdomen soft.

17 Q. Oh, I can read that one, it
18 is at the end of the line before that one, can you
19 help me with that one?

20 A. I can't read it either.

21 Q. Okay. The abdomen is soft and
22 the liver is one centimetre down from the costal
23 margin, the costal rib, I take it?

24 A. Yes.

25 Q. The baby is sucking on a
soother, stable, no signs of failure. Did that



I6

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...your observations of the child in the
...of the shift?

3

4

A. Yes.

5

Q. Now, from pages 214 to 215

6

...the flow sheet, it appears that
...at 8 o'clock, 2000 hours, bottom of page
214, you were taking vital signs hourly?

7

8

A. Yes.

9

Q. Except at 10:30 the last

10

entry on page 214, can you tell me what times those
vital signs were taken. There is a 2300 and then
there is a 2330 written in above it.

11

12

A. Oh, I took the respiration

13

rate every half hour, I was a bit concerned, it went
up to 90.

14

15

Q. I see, okay. And then full

16

vital signs on the hour?

17

A. Yes.

18

Q. All right. Vital signs are

19

being taken hourly on this child. What breaks
did you have on that shift prior to the time of the
baby's arrest?

20

21

A. Between 10 and 10:30 for

22

coffee and 1:30 to 2 for my lunch break.

23

Q. Okay. Now, are you telling

24

25



Scott, dr.ex.
(Lamek)

6857

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2

me the times that you normally took them or do you recall that those were the times that you took on that particular night?

4

A. I recall.

5

6

Q. All right. So, you took a coffee break at 10 to 10:30 you said?

7

8

A. After I had given the medication at 10 o'clock.

9

10

11

Q. You gave medications at 10 o'clock, and that's at page 53, let's take a look at it, Mrs. Scott. The med sheet on page 53 shows that at 10 o'clock you gave aldactazide?

12

A. Yes.

13

14

Q. And you signed for that at 10 o'clock. Did you in fact administer that drug yourself?

15

16

A. Yes.

17

Q. At 10?

18

A. Well, five minutes.

19

Q. All right, at 10 or thereabouts?

20

A. Yes.

21

Q. And it also records that at midnight you gave ampicillin?

22

A. No, not at midnight, 1:30.

23

Q. Oh, okay. It is recorded as

24

25



1

2

Q. Your name you've got 0130?

3

A. Yes.

4

A. And that records that you gave,

5

Q. The 1800 dose at 1:30?

6

A. Yes.

7

Q. And is that a precise time
of administration, 1:30?

8

A. Yes.

9

A. Do you recall why the midnight

10

1800 dose was not given until 1:30?

11

A. Because the 1800 dose wasn't
given and I had to give it at 7:30 in the evening.

12

Q.

All right.

13

A.

So, to bring it up to every

14

six hours.

15

Q.

All right. The order as it
appears in the second column from the left is
Q68, the ampicillin to be given every six hours.

16

17

A.

Yes.

18

Q.

And as you correctly point
out the 6 o'clock dose appears to have been given
by you at 7:30?

20

21

A.

Yes.

22

Q.

All right. And therefore you
took your six hours from that and gave the next dose

23

24

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at 10:30

A. Yes.

Q. Now, the vital signs which
are
and ~~there~~ as having been recorded/at 10 and 10:30
and then 11. What about the 10:30, respiration
rate. Do you recall whether you took that before
or after you went on your break?

A. No, I came back after my
coffee break and I saw he was breathing fast, that's
why I took it.

Q. All right. And that helps
you I take it to fix the time you went for your
coffee break?

A. Yes.

Q. All right. Who relieved you
for your coffee break?

A. Phyllis Trayner.

Q. Do you recall how long you were
out on that break?

A. The coffee break?

Q. Yes.

A. The usual, 25 minutes.

Q. All right. So far as you know
was Mrs. Trayner with Baby Estrella all the time
you were on that coffee break?



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A. Janet Brownless might have
come in and talked to her, I don't know.

Q. All right. The child was on
constant care. I take it therefore that whoever
was relieving you should have been with the child
throughout the time you were away?

A. Yes.

Q. Do you have any basis for
thinking that she was not with that child, Mrs.
Trayner was not with the child throughout the time
you were on your coffee break?

A. At lunch time?

A. No, at coffee break first of

A. Oh, no.

Q. All right. Was anyone else
in the room when you left other than Mrs. Trayner?

A. I think, I am not sure, Janet
Brownless came.

Q. Okay, just about the time you
were leaving?

A. Yes.

Q. Was anyone in the room other
than Mrs. Trayner when you returned from your coffee
break?



1

A. No.

2

3

4

Q. All right. And you got back as
you have said about 10:30 and took the half hour
respiratory rate on Janice Estrella?

5

A. Yes.

6

7

8

Q. Now, from the time you came
back from your coffee break until you went for lunch
were you with the child constantly?

9

A. Yes.

10

11

Q. Okay. Did anyone else come
into the room in that period?

12

A. Yes.

13

14

Q. Who came in?

A. Phyllis Trayner.

Q. How frequently did she come
into the room?

15

16

17

A. She might come in more times
but she came in twice and asked me whether I would
like to stretch my legs.

18

19

Q. All right. This was not your
lunch break she was talking about?

20

A. No.

21

22

Q. Did you take her up on the
offer?

23

A. No.

24

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Q. Okay. When Mrs. Trayner came into the room on those two occasions were you in the room at the same time?

A. Yes.

Q. And you stayed in the room?

A. Yes.

Q. And she left then?

A. Yes.

Q. Okay. Other than Mrs. Trayner coming in to offer to give you a chance to go out and stretch your legs, did anyone else come into the room between your return from coffee break and you going off for lunch?

A. Janet Brownless just came to the door and talked to me to say high.

Q. Okay. Did you stay in the room throughout the time that she was visiting?

A. Yes.

Q. Okay. Now, we know that you gave ampicillin at 1:30?

A. Yes.

Q. Was that before you went on your lunch break?

A. Phyllis came and then I went out and got my ampicillin, went back and put it in



1

2

the buretrol and then went for my lunch break.

3

Q. Okay.

4

THE COMMISSIONER: I am sorry, you
will have to say that again.

5

6

The question was, was this before or
after your lunch break and you said something about
Phyllis Trayner.

7

8

THE WITNESS: Before, before my lunch

9

break.

10

THE COMMISSIONER: Phyllis Trayner came
in?

11

12

THE WITNESS: Phyllis Trayner came in
earlier and then I went out of the room.

13

THE COMMISSIONER: Yes.

14

THE WITNESS: To get the medication

15

from the medication room.

16

THE COMMISSIONER: Yes.

17

THE WITNESS: I went back to the room

18

and gave the medication and then left for my
lunch.

19

THE COMMISSIONER: I see, yes, all

20

right.

21

MR. LAMEK: Q. Now, when Mrs. Trayner

22

came into the room did she come to relieve you for

23

your lunch break?

24

25



1

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A. Yes, yes.

3

Q. And you went out to get the
ampicillin from the medication room?

4

A. Yes.

5

6

Q. And went back to 423 with
the ampicillin?

7

A. Yes.

8

Q. And administered it into the
buretrol?

9

10

A. Yes.

11

Q. And then left for lunch?

12

A. Yes.

13

Q. Now, we know the administration
as you have said was at 1:30. Do I take it there-
fore that you left for lunch immediately after
1:30?

14

15

16

A. Yes.

17

Q. Where did you go for your
lunch break that night?

18

19

A. At the back of the nursing
station.

20

21

Q. Had you brought your lunch
from home?

22

A. Yes.

23

Q. So, you didn't have to go

24

25



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downstairs or anything to get something to eat?

3

A. No.

4

Q. Were there other nurses at

5

the nursing station when you got there for your

6

lunch?

7

A. I think it was - I can remember

8

Mrs. Christie but I can't remember anybody else.

9

Q. You can remember Mrs. Christie,

10

you can't remember anyone else. Now, do you mean

11

you can't remember anyone else being there or you

12

can't remember the names of other people who may

13

have been there?

14

A. I can't remember anybody else

15

being there.

16

Q. Do you recall anyone else

17

coming to the nursing station while you were having
your lunch?

18

A. Phyllis Trayner at about

19

2 o'clock.

20

Q. Okay. Well, I will come to

21

that in a moment. Anyone other than Mrs. Trayner
at about 2 o'clock. Were there other nurses around
the nursing station?

22

A. There were but I can't remember

23

who they were.

24

25



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Q. Okay. Now, you have told us
that lunch break was normally on the average about
45 minutes.

A. Yes.

Q. It might be a little less,
it might be a little more?

A. Yes.

Q. But you also told me that
your lunch break that night was, what, about a half
an hour?

A. Yes.

Q. You said you left at about
1:30 and came back around 2?

A. Yes.

Q. You said a moment ago that
Phyllis Trayner came to the nursing station while
you were out there?

A. Yes.

Q. What time was that?

A. Oh, about 5 to 2 or 2 o'clock.

Q. About 2 o'clock?

A. Yes.

Q. Were you surprised?

A. Yes.

Q. Did you think that she would



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2

be in Estrella's room looking after her while you
were having lunch?

3

4

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A. Well, she didn't give me time
to be surprised, she came in and turned on the inter-
com and said, oh, we can hear Estrella from the
intercom and then she sat down and started to do
some writing.

8

9

Q. So, Mrs. Trayner, came, what,
to the front of the nursing station or the back?

10

11

A. Yes, the desk.

12

13

Q. Went to the desk at the front
and you saw her when she got there?

14

15

A. I was at the back, yes.

16

17

Q. And she turned on the intercom?

18

19

A. The intercom, yes.

Q. And is that an intercom to each
of the rooms?

20

21

A. To all of the rooms, yes.

22

23

Q. And she said we will be able
to hear Estrella?

24

25

A. Yes, hear Estrella on the
intercom.

Q. On the intercom. And she
started to do some work at the desk?

A. Well, she started sitting down.



1

18

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I saw her from the back.

3

Q. All right. And what did you

4

say?

5

A. Well, I felt quite uneasy

6

leaving Estrella in the room all by herself down
the corridor.

7

Q. I'm sorry, you said you felt

8

uneasy leaving Estrella alone?

9

A. Yes.

10

Q. Yes.

11

A. So, I poured myself another

12

cup of coffee and I went back.

13

Q. So, you poured another cup

14

of coffee and went back to Room 423?

15

A. Yes, I told her that it is

16

okay, I want to finish my book anyway.

17

Q. You told Mrs. Trayner that?

18

A. Yes.

19

Q. Was it unusual for someone

20

who was providing nursing care or supposed to be
relieving on constant care to leave the child alone
in your experience?

21

A. No.

22

23

24

25

- - - - -



DM.jc
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Q. That is not unusual?

A. Yes.

Q. It is unusual?

A. Yes.

Q. For a child who is receiving
constant care to be left entirely alone?

A. Yes.

Q. I recognize that Mrs. Trayner
was your team leader, but did you remonstrate with
her at all, did you say what are you doing leaving
my patient alone?

A. No.

Q. Did you report that incident to
anybody?

A. No.

Q. But it obviously, from what you
said made you uneasy that the child was left alone?

A. Yes.

Q. You poured yourself another
cup of coffee and you went back to Room 423?

A. Yes.

Q. Now, when you got there, how
was the baby?

A. She was all right, no change.

Q. Was it on your return from lunch



J.2

1

2

that you did the child's 2 o'clock vital signs?

3

A. Yes. Not exactly two, it

4

could be five or ten minutes --

5

Q. When you returned from the

6

nursing station?

7

A. Yes.

8

Q. And there found at page 214,

9

215, page 215 you record the child's 2 o'clock vital

10

signs as being: "temperature 37.4" which was down a

11

bit from the earlier elevation in the evening.

12

"Respiration .." I'm sorry, "heart rate 127;

13

A. Yes.

14

Q. Vital signs not greatly different

15

from those you had recorded earlier in the shift, is

16

A. No.

17

Q. Did the child appear to be

18

essentially the same as she had been in the first

19

part of the shift?

20

A. Yes.

21

Q. And that was approximately

22

2 o'clock?

23

A. Yes.

24

Q. And then what happened?

25



J. 4

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Q "Rapidly going slow"?

A "Rapid and slow".

Q "Rapid and slow"?

A It goes up and then slows down.

Q You mean the rate was fluctuating?

A Yes.

Q Okay. You say "apex was faint".

A Yes.

Q "On auscultation"?

A Yes.

Q The rate --

A "The rate on the monitor shows

100 and then went down to 2.

Q Down to 2?

A Yes, just go up and down.

Q Down to 2, you mean 2 or 200?

A 2.

Q 2?

A Yes.

Q That is essentially stopped?

A It showed on the cardiac monitor.

Q So you started to do cardio-

pulmonary massage?

A No, I pressed the button.

Q You pressed the button?



J.3

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A. I sat down and read my book,
and glancing at the baby occasionally, every now and
then.

Q. Were you sitting at the bedside?

A. Yes, beside the cot.

Q. You were sitting beside her cot
and you were reading your book and keeping an eye
on the baby?

A. Yes.

Q. Page 128 of the chart your note
records that at 0240:

"Baby observed to be slightly gasping
and respiration rate rapidly ... "
what is that?

A. "Rapid ... ".

Q. Maybe you had better help me
with your writing.

A. I can't see very well in this.

THE COMMISSIONER: "Rapidly going
down", would that be? I have a lot of practice with
that writing and yours is much better than mine,
Mrs. Scott.

MR. LAMEK: Q. It does look like
"rapidly going down".

A. And "slow".



J.5

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2

A. Yes.

3

Q. Who started CPR?

4

A. Phyllis.

5

Q. She came into the room when you pressed the buzzer?

6

A. Yes, she came in the room and she started listening to the baby's heart and I was fixing oxygen, and then she said call Code 25 and I rushed back to the door and I saw Meredith coming in and Bertha Bell.

10

Q. Meredith?

11

A. I saw Bertha Bell coming in just as I was going out of the door.

12

13

Q. Yes?

14

A. And I said to her get 25 and one of the nurses phoned for 25.

15

16

Q. One of the nurses called 25?

17

A. I don't know who it was.

18

Q. And the arrest team arrived?

19

A. Yes.

20

Q. Shortly thereafter?

21

A. Yes.

22

Q. Did you remain throughout the resuscitation effort?

23

A. Yes.

24

25



J.6

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Q Do you recall what you were
doing that night?

A I was drawing up the drugs.

Q Do you remember who else was
there other than the resuscitation team?

A No, just Bertha, Mrs. Bell.

Q Did Mrs. Bell stay throughout
the thing?

A Yes.

Q Did Mrs. Trayner stay throughout?

A Yes.

Q Anybody else that you can recall?

A I don't - one of the supervisors
but I don't --

Q And as we know the resuscitation
effort was not successful, the child died. Were you
surprised when that child arrested and died when she
did?

A Yes and no.

Q Could you explain that to us?

A Well, I was surprised but I
didn't expect her to die that night, but considering
her trouble, her condition, I wasn't surprised.

Q You are telling me that she was
clearly a very sick child?



J.7

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2

A. Yes.

3

Q. In that sense her death didn't

4

surprise you?

5

A. Yes.

6

Q. But on the other hand you hadn't

7

expected her to die that night?

8

A. That's right.

9

Q. Did you wonder, Mrs. Scott,

10

what could have happened to send her into such a
sudden dramatic decline at 2:40 in the morning?

11

A. We did know that her dig. level

12

had been elevated in the past few days and Dr. Schaffer

13

was looking very serious and thoughtful, but I don't

14

know what he said to the other nurses in the nursing

15

station because I was busy in the room cleaning up

16

the baby and getting her ready for the parents to come.

17

Q. Let us take that a bit at a

18

time if we can. You say you knew that her digoxin
level had been elevated for the past few days?

19

A. Yes.

20

Q. Indeed it had been elevated

21

since January the 7th when she had a very high digoxin
level indeed?

22

A. Well, I couldn't remember that.

23

Q. Indeed she had had an earlier

24

25



J.8

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2

respiratory arrest had she not?

3

A. Yes.

4

Q. From which she had been

5

resuscitated?

6

A. Yes.

7

Q. And digoxin had been held since

8

the 7th of January?

9

A. Yes.

10

Q. You can take my word for that.

11

Was it also your understanding that

12

since the high level on the 7th of January subsequent

13

assays had shown that the digoxin level was coming

down, did you understand that?

14

A. I don't recall.

15

Q. You don't recall that. Then you

say Dr. Schaffer was looking rather thoughtful about it.

16

A. Yes.

17

Q. But you don't know what he may

18

have said to anyone else?

19

A. No.

20

Q. Did he say anything to you?

21

A. No.

22

Q. Did you ask him what he thought

might have caused this death?

23

A. Immediately after the death?

24

25



J.9

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Q Yes.

3

A I didn't have the time to ask him.

4

Q I am sorry?

5

A I was busy with the parents and
the parents came and I couldn't ask him when the
parents were there.

7

8

Q You say you knew the child had
a high digoxin level. Did it occur to you to wonder
whether that high digoxin level had had something to
do with her death?

10

11

A No.

12

Q What then was the relevance of
recalling that she had a high digoxin level?

13

14

A Probably I had thought of that
but I was not too sure.

15

16

Q Do you recall whether you did
think of that?

17

A Not that night.

18

Q When did you think of that?

19

A I wasn't very sure but I didn't
know until the police interviewed me and said that she
had a very high level.

20

21

22

Q Until the police interviewed
you then it did not occur to you that digoxin might
have had something to do with her death?

23

24

25



J.10

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2

A. No.

3

Q. Even though you had recalled

4

on the night that she died that she had a high digoxin
level?

5

A. Yes.

6

Q. Did you on the night of January
the 10th to 11th administer any digoxin to Baby
Estrella?

8

9

A. No.

10

Q. Did you administer any drug
other than aldactazide and ampicillin that night?

11

12

A. No.

13

Q. I take it you are satisfied
you gave the correct doses of those two drugs?

14

A. Yes.

15

Q. And you didn't confuse any
drugs or anything of that sort?

16

17

A. No.

18

Q. Did you see anyone else that

19

night administer any drug to Estrella prior to the time
she arrested?

20

A. No.

21

Q. While you were in that room

22

did anybody other than yourself administer any drug
of any kind to that baby?

23

24

25



J.11

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A. No.

3

4

Q. Had it occurred while you were
in the room is there any way you could have avoided
seeing it?

5

6

A. When I was in the room?

7

Q. Yes.

8

A. No.

9

10

Q. Did you subsequently learn that
a high digoxin level had been recorded in a post
mortem sample taken from that child?

11

12

A. I am not sure. The only time I
recall knowing about that is when the police told me.

13

14

Q. It was then that you learned
that in a post mortem sample a high digoxin level had
been found?

15

A. Yes.

16

17

Q. You had no information about that
prior to learning it from the police?

18

A. Yes.

19

20

21

22

23

24

25

Q. And other than, as you have
told me, Dr. Tucker at 11:30; Mrs. Trayner when she
relieved you for your break; and Janet Brownless who
popped in a couple of times, do you recall seeing
anyone else in Room 423 that night prior to the time
of Janice Estrella's arrest?



J.12

1

2

A. The parents came.

3

Q. The parents came?

4

A. The mother and the grandmother

5

came.

6

Q. Were you there throughout the

7

time they were there?

8

A. Yes.

9

Q. What time did they come?

10

A. They came about 8:30.

11

Q. How long did they stay?

12

A. Oh, they left about ten.

13

Q. Have we now named everybody that

you can recall having seen in that room that night?

14

A. Yes.

15

Q. Just to sum up those events

and their chronology. From approximately midnight

16

until the time you called the Code 25, do I have it

17

correctly, Mrs. Scott, that after your return from

18

your coffee break you were with Baby Estrella

19

constantly until you were relieved by Mrs. Trayner

20

at about 1:30 for your lunch break?

21

A. Yes.

22

Q. Do you recall what you were

doing until 1:30?

23

A. I was reading a book and

24

watching a film.

25



J.13

1

2

Q Do you recall what the film was?

3

A Yes.

4

Q What was it?

5

A "Sweet Charity".

6

Q Was that on television?

7

A Yes.

8

Q Was there a television set in

Room 423?

9

A Yes.

10

MR. LAMEK: Mr. Commissioner, I can

11

tell you that Mr. Rosenberg has been good enough to

12

provide me with a copy of TV Times, or Guide for that

13

night and indeed "Sweet Charity" was playing that

14

night. If we need to mark it it is available but I

15

don't think we need it.

16

THE COMMISSIONER: No, no. Thank you.

17

MR. LAMEK: Q So when you returned

18

from coffee you were with the child constantly until

19

you got off for your lunch break at 1:30 or very
shortly thereafter?

20

A Yes.

21

Q You are out of Room 423 from

22

1:30 until about 2 o'clock, during that time to the

23

best of your knowledge Mrs. Trayner, the team leader,
was looking after the child?

24

25



J.14

1

2

A. Yes.

3

Q. She apparently left the room

4

at about 2 o'clock and came back to the nursing
station.

5

A. Yes.

6

Q. And you within a matter of

7

minutes returned to the room?

8

A. Yes.

9

THE COMMISSIONER: That coffee that
you poured did you take that into the room with you?

10

THE WITNESS: Yes.

11

MR. LAMEK: Q. When you got back to

12

the room the child appeared to be in the same

13

condition as she had been in the first part of the
shift?

14

15

A. Yes.

16

Q. And she remained so until

17

about 40 minutes later when she suddenly manifested
pretty severe problems?

18

A. Yes.

19

Q. Her heart rate zoomed up and

20

the dropped to almost nothing?

21

A. Yes.

22

Q. And her respiratory rate that had

23

been fast for a couple of days was now fluctuating?

24

25



J.15

1

2

A. Yes.

3

4

Q. And that progressed pretty rapidly to cardiac arrest and then death?

5

A. Yes.

6

Q. Have I correctly summarized that time span?

7

A. Yes.

8

9

10

11

Q. Did it occur to you Mrs. Scott, looking back at the events of that night that in some measure they paralleled the events of the night of Brian Gage's death?

12

A. Yes.

13

14

15

16

17

Q. That is to say you had gone to lunch leaving an apparently stable child, you got back, the child seemed unchanged, and within an hour the child suddenly developed severe symptoms and progressed rapidly to cardiac arrest and death. Did that parallel occur to you?

18

A. Yes.

19

Q. When did it occur to you?

20

A. After Estrella.

21

Q. After Estrella?

22

A. Yes.

23

Q. Did you ascribe it to anything other than sheer coincidence?

24

25



J.16

1

2

A. No.

3

Q. Did you regard it as sheer

4

coincidence too that on each occasion you had gone off

5

for lunch and the child was being cared for by Mrs.

6

Trayner?

7

A. No.

8

Q. That was also to your mind at

that time sheer coincidence?

9

A. Yes.

10

Q. You said when you mentioned

11

Estrella as a particular example that your general

12

impression was that you would go off for lunch, or

13

another break, leaving a child and come back from the

14

break and shortly afterwards the child would get sick

15

and go into arrest?

16

A. Yes.

17

18

19

20

21

22

23

24

25



K
EMT/PS

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O. Had that impression already
formed in your mind by the time of Estrella's death?

A. Yes.

O. All right.

A. There were other kids not looked
after by me.

Q. There were other children not
looked after by you. It was your general observation,
was it, that children tended to die shortly after
nurse in charge of them had gone for break?

A. Yes.

Q. Was that a matter that other
nurses on the floor were commenting upon?

A. I don't know.

Q. Did you disclose to anyone else
your observation?

A. No.

Q. You didn't discuss it with
anybody?

A. No.

Q. I want to take things out of
sequence -- I see it is a quarter to 1, Mr.
Commissioner. I was about to move to another case.

THE COMMISSIONER: Yes.

MR. LAMEK: Is it the proper time to



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Scott
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6886

1

2

2

break?

3

THE COMMISSIONER: Yes. Until 2:15.

4

MR. LAMEK: Till 2:15. Thank you, sir.

5

--Luncheon recess.

6

7

8

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AA
EMT/PS

1

2

---On resuming at 2:15 p.m.

3

THE COMMISSIONER: Yes, Mr. Lamek.

4

MR. LAMEK: Thank you, sir.

5

Q. Mrs. Scott, we were talking about
Janice Estrella just before we broke for lunch.

6

7

8

9

10

I would like now to jump ahead in time
if I may to the only other case of those in which we
are interested where as I understand it on the night
the child died you were required to be with the child
constantly, and that is the case of Sharlon Gardner.

11

A. Yes.

12

Q. She died in the early hours of
March 18, 1981.

13

14

A. Yes.

15

16

MR. LAMEK: I am going to ask the
Registrar if he would put the chart in front of you,
please.

17

18

THE COMMISSIONER: Sorry, what was the
preface to that statement? You said the only other?

19

20

21

MR. LAMEK: The only other child of
those in whom we are interested where Mrs. Scott
on the night of the child's death was providing,
in this case, shared nursing care.

22

23

THE COMMISSIONER: Shared? Oh, I see,
yes.

24

25



1

2

2

MR. LAMEK: Q. Now we are looking at the night, Mrs. Scott, of March 17 to 18. You were on duty that night I believe.

4

5

A. Yes.

6

7

THE COMMISSIONER: I'm sorry. It is these little asides that get to me. What about Warner? Wasn't --

8

9

MR. LAMEK: Not on constant or shared care, sir. Was assigned to the patient but not on a continuous basis.

10

11

THE COMMISSIONER: Oh, I see. All right. Very well.

12

13

MR. LAMEK: Having just moved from Estrella where there was constant care provided by Mrs. Scott --

14

15

THE COMMISSIONER: Yes.

16

17

MR. LAMEK: -- I thought I would move to Gardner where there was also an enhanced degree of nursing care provided.

18

19

THE COMMISSIONER: Yes. All right.

20

21

MR. LAMEK: You were assigned, I think, Mrs. Scott, to provide shared nursing care to Baby Gardner in Room 418?

22

A. Yes.

23

Q. And to another child who was also

24

25



1

3

2

in that same room?

3

A. Yes.

4

Q. So you had two children in 418

5

and they were your only two patients that night?

6

A. Yes.

7

Q. Now we know from the assignment

8

book (and that, Mr. Commissioner, is Exhibit 32A at

9

tab 13). Perhaps we can look at this together. We can
both look at my copy, Mrs. Scott.

10

We have Tuesday, March 17th, and here

11

we are at the long night. Mrs. Trayner was in charge

12

and had no specific patient assignments. You as we

13

have said had two patients in 418 and were delivering

14

shared nursing care to them and you were the only two

15

RN's on that night, were you not?

16

A. Yes.

17

Q. On that ward. There were two

18

RNA's. Miss Brownless was on duty and had seven

19

patients, four in Room 425 and three more in 418.

20

Mrs. Christie was on and she had six patients.

21

A. Yes.

22

Q. Four in 421 and one in 423 and

23

one in Room 426.

24

A. Yes.

25

Q. So you were doing shared care



4
1
2 to two; Miss Brownless was looking after seven
3 patients; Mrs. Christie was looking after six and
4 Mrs. Trayner being in charge.

5 Now Miss Brownless as we have said
6 had three patients in Room 418 where your two patients
7 were. Do you recall seeing Miss Brownless in 418 in the
8 course of the night?

9 A. Yes.

10 Q. Other than her do you recall see-
11 ing anyone else, nurse, doctor or anyone else in Room
12 418 that night prior to the arrest of Charlon Gardner?

13 A. Yes.

14 Q. Who was that?

15 A. Phyllis Trayner and the doctor.

16 Q. Phyllis Trayner and the doctor?

17 All right. Tell me first about the doctor.

18 If we look at the chart will that help us? Page 57
19 is your nursing note, Mrs. Scott.

20 On page 56 there is a note by Dr.
21 Kobayashi. That appears to be the 18th of March at
22 2:30 in the morning. Is that the reference to the
23 doctor that you were making?

24 A. No. He came in earlier.

25 Q. I'm sorry?

A. He came in earlier.



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Q. All right. You are going to have to help me with that. That is before the arrest; you understand that.

A. Yes, before the arrest.

Q. Well, the note that I referred you to was before the arrest.

A. No, not that. It was earlier, about 10, 11.

Q. All right. He does not appear to have made a note in that case.

A. He just came in and had a look at the baby and we told him about the apneic spells.

Q. Right.

A. And he was on prostaglandin and so he reduced the rate.

Q. Isn't that the note on page 56 to which I referred you a moment ago which appears to be Dr. Kobayashi reducing the rate of the I.V. flow? Three cc.'s an hour down to 2-1/2 cc.'s, down to 2 cc.'s an hour. Isn't that the note?

A. Page 56? No, it is not this one.

Q. Okay.

A. No.

Q. Do you recall which doctor that was, Mrs. Scott?



6

1

2

3

A. It was him but I think he came a
bit earlier on, too.

4

5

Q. Perhaps the note on the bottom
of page 55 -- it is a signature that is not particularly
easy to read. It may be Dr. Kobayashi.

6

7

A. No, I don't recall this doctor.

8

9

Q. That certainly seems to reflect
a reduction of the prostaglandin flow down to 2 centi-
meters an hour, doesn't it?

10

A. Yes.

11

12

Q. And that's the 17th of March which
was the beginning of the shift. What does that look
like, 2030 hours? 8:30?

13

14

A. Yes, 8:30.

15

Q. Is that about the time you recall
a doctor having been in?

16

17

A. That wasn't Dr. Kobayashi. He
came before 2:30 as well.

18

19

Q. Do you recognize the signature
at the bottom of page 55?

20

A. No.

21

Q. It appears to be a physician's
note, does it not?

22

23

A. Yes.

24

25



7
1
2 THE COMMISSIONER: I'm sorry, you say
3 you do recognize the signature?

4 THE WITNESS: No.

5 THE COMMISSIONER: Oh, you don't?

6 MR. LAMEK: You don't recognize
7 the signature on the bottom of page 55 but it does
8 appear to be a physician's note, does it not?

9 A. Yes.

10 Q. And appears to be referring to the
11 reduction of prostaglandin flow rate?

12 A. They reduced it during the day
13 shift as well.

14 Q. Okay. As far as the night shift
15 is concerned, does that appear to be the note of
16 the earlier physician visit that you made reference to
17 a moment ago?

18 A. Not that physician. I remember
19 Dr. Kobayashi.

20 Q. You remember Dr. Kobayashi --

21 A. Yes.

22 Q. -- being in earlier than 2:30
23 in the morning?

24 A. Yes.

25 Q. You remember two doctors being
in earlier than 2:30 in the morning?



1

8

2

A. No. Just Dr. Kobayashi.

3

Q. I suppose that could be a hurried

4

Dr. Kobayashi signature on the bottom of page 55,
could it not?

5

A. No.

6

THE COMMISSIONER: You say it wasn't

7

Dr. Kobayashi. Is that right, Mrs. Scott? It wasn't

8

Dr. Kobayashi --

9

A. It doesn't look like it.

10

THE COMMISSIONER: No, no, but the

11

doctor that came in, the doctor you saw in the room.

12

THE WITNESS: Yes.

13

THE COMMISSIONER: That night, was

not Dr. Kobayashi?

14

THE WITNESS: It was Dr. Kobayashi.

15

THE COMMISSIONER: It was Dr. Kobayashi?

16

I'm sorry. There was no other doctor besides Dr.

17

Kobayashi who came in; am I right?

18

THE WITNESS: I don't recall.

19

THE COMMISSIONER: All right. Thank

you.

20

MR. LAMEK: O. Well, if we look at page

21

101, Mrs. Scott, that may help us. There is a physician's

22

order there at 1930 hours which would be right at the

23

beginning of your shift, would it not, on the 17th of

24

25



1

9

2

March?

3

A. Yes.

4

5

Q. It talks about reducing the
prostaglandin infusion to 2.0 cubic centimeters an
hour. And that seems to be signed by Dr. Kobayashi.

6

A. Yes.

7

8

9

Q. Do you recall his having come in
at the beginning of the shift and giving that order
to reduce the prostaglandin flow?

10

A. Yes.

11

12

Q. Is that the visit that you were
referring to a few minutes ago?

13

A. Not -- he came in after that as
well.

14

Q. And before 2:30?

15

A. Yes.

16

17

18

19

Q. You don't think that may have
been the note on page 55 at apparently 8:30 in the
evening? Forget about the signature for a moment.
Is 8:30 about the time that Dr. Kobayashi came in?

20

A. Between that and 9:00.

21

Q. Between 8:30 and 9:00?

22

A. Yes.

23

THE COMMISSIONER: But you also said
he came in about 10:00.

24

25



10 1
2 THE WITNESS: Yes, he came in a couple
3 of times but not necessarily he copy notes
4 every time he came in.

5 MR. LAMEK: Q. Okay. Well, can we
6 get at it this way --

7 MR. ROSENBERG: Can I just help you?

8 MR. LAMEK: Sure. I would be glad
9 to.

10 MR. ROSENBERG: If you look at page
11 52 of the chart you will see another way Dr. Kobayashi
12 signs his signature.

13 MR. LAMEK: Yes.

14 MR. ROSENBERG: That looks close to what
15 is on page 55.

16 MR. LAMEK: Yes, it does.

17 MR. ROLAND: To further the detective
18 work on the signature, if you look at the J on page
19 55 and the one on 101 it is much the same. I think
20 it looks like it is Dr. Kobayashi.

21 MR. LAMEK: I think it is too.

22 THE COMMISSIONER: I don't know how it
23 could be, though, that sometimes he is fond of the
24 K at the beginning of his name and sometimes it is
25 hardly even --

MR. LAMEK: I think it is a K at the



11

1

2

beginning of that name. A J and then a K.

3

4

THE COMMISSIONER: Yes. However, we will accept them as Dr. Kobayashi's until somebody shows to the contrary.

5

6

7

8

MR. LAMEK: O. Can I cover it this way, Mrs. Scott: do you recall any physician other than Dr. Kobayashi being in the room with Charlon Gardner prior to that child's arrest?

9

10

11

A. No.
Q. And your recollection is that he came in, what, two or three times did you say?

12

13

14

A. At least twice before the arrest.

Q. All right. We know that he wrote an order at 7:30, and that is at page 101 of the chart.

15

16

17

18

19

Q. And if the signature on page 55 indeed be Dr. Kobayashi's, he was apparently in the room at about 8:30 in the evening. And then on page 56 he was apparently in the room at about 2:30 in the morning.

20

21

22

23

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25

A. Yes.

Q. Were you present on each of those occasions when Dr. Kobayashi came into the room?

A. Yes.

Q. And you didn't leave the child



Scott
dr. ex. (Lamek)

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with him at all?

A. No.

O. And the other person you said
you recall seeing in Room 418 that night other than
Miss Brownless and Dr. Kobayashi was Mrs. Trayner?

A. Yes.

Q. When did you see her in the
room?

A. She was there when the doctors
were there.

O. She came with --

A. Yes.

Q. -- Dr. Kobayashi?

A. When she saw the doctor came in
she came in, too.

Q. Was she there on any other
occasion than on the occasion of the doctors being
present?

A. Well, she usually comes in every
now and then.

O. In the normal course?

A. Yes.

O. To see how things are going?

A. Yes.

O. How the patients are?



13

1

2

A. Yes.

3

Q. Do you have any particular
recollection of her coming in that way on that night?

4

A. No.

5

6

Q. Do you recall how frequently Miss
Brownless was in the room that night? She had
patients in room 418 and patients elsewhere.

7

8

A. She was there for the signs and
the feeding.

9

10

Q. Now when you are on shared nursing
care do you need to be relieved for breaks?

11

12

A. Yes.

13

Q. And as you told us this morning
with respect to constant care, is that relief normally
given by an RN?

14

15

A. Yes.

16

Q. Do you recall any occasion when
you were on shared nursing care for two children when
you were relieved for a break by anyone other than
an RN?

17

18

A. No.

19

Q. Now, looking at your nursing note
for the night of March 17 to 18 on page 57 of the
chart, and taking assistance from that if you need
to, can you tell us, please, what was the child's

20

21

22

23

24

25



14 1
2 condition and course from the beginning of the shift
3 until the time of her arrest?

4 A. Well, he had a temperature --

5 Q. He -- I thought Charlon was a
6 girl.

7 A. Oh, sorry.

8 Q. I don't know. I think it was --

9 A. I think it was a she.

10 Q. I think it was.

11 A. She had a temperature of 38.3.

12 Q. Is that slightly elevated?

13 A. Yes. And her respirations were
14 rather high but regular. And her apex was 178 and
15 162 regular, but it was very stable for her.

16 Q. And was that the generally
17 applicable picture until 3:30 in the morning?

18 A. Yes.

19 Q. Now the very last sheet of the
20 chart as it is bound there, Mrs. Scott, is the
21 flow sheet, and seems to record vital signs hourly,
22 does it not?

23 A. Yes.
24
25



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Q. And the picture as you have described it seems to be reasonably constant until 3 o'clock in the morning at least from the beginning of the shift; is that fair?

A. Yes.

Q. Okay. So, again I take it not a well child and in need of some enhanced level of nursing care but she seemed to be stable in the sense that her condition was not fluctuating or changing; is that fair?

A. That's right.

Q. Okay. Until 3 o'clock in the morning did you have any cause for concern that that child might not make it through the night?

A. No.

Q. When did you take your breaks that night?

A. I don't recall.

Q. Do you have any recollection of taking them at anything other than the usual time frame that you told us about earlier?

A. No.

Q. 10 or 10:30 for coffee and 1:30ish in the morning for lunch?

A. Yes.



1

2

3

Q. All right. Who relieved you
for your breaks that night?

4

5

A. I don't recall but probably
Phyllis Trayner.

6

7

8

Q. Had you been relieved for
your breaks by an RNA that night would that have
been unusual?

9

10

11

A. Yes.
Q. Would it have been sufficiently
unusual for you to have recalled it?

12

13

A. No.
Q. Not so unusual that you
wouldn't remember?

14

15

16

17

A. I mean yes.
Q. Because you told us earlier
that you had never been relieved when you were on
this kind of care by anyone other than RNs?

18

19

20

A. Yes.
Q. And we know that on your side
of the ward at least that night you and Mrs. Trayner
were the only two RNs on duty?

21

22

23

A. Yes.
Q. But you do not recall who
it was that relieved you for your break?

24

25

A. That's right.



Scott, dr.ex.
(Lamek)

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Q. Now, Baby Gardner's condition I take it when you left for your break was as you have described it, she was not well, she's got a slightly elevated temperature, she's got, what, a slightly elevated heart rate and all the rest of it, but she was stable?

A. Yes.

Q. Fair enough. Do you recall what her condition was when you returned from your lunch break?

A. There was no change.

Q. No change?

A. No.

Q. Do you recall whether there was anybody in the room when you left for lunch?

A. No.

Q. Do you recall whether there was anybody in the room when you came back from lunch?

A. No.

Q. Okay.

THE COMMISSIONER: Do you recall going for lunch or do you recall coming back from lunch?

THE WITNESS: No.

MR. LAMEK: Q. Is there any reason to think that you didn't take a lunch break that night?



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2

3

A. No, I always take a lunch break.

4

5

6

Q. Okay. Certainly you would have remembered that if you had missed your lunch entirely, wouldn't you?

7

8

9

10

11

A. I can't survive without eating.

12

13

14

15

Q. I take it though, Mrs. Scott, that your relief for those breaks, whoever it was, and you can't remember, but your relief would have been there when you left and when you came back?

16

17

A. Yes.

18

19

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23

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25

Q. All right. How long after your return did the baby get into trouble, how much before 3:30 did you get back from lunch is what I am asking you?

A. About an hour, an hour and a half.

Q. About an hour to an hour and a half. You have recorded what happened in your nursing note on page 57. You have recorded what the vital signs were, the apex and everything else, regular, until 0330 hours the rate went down to 122 and was very irregular and Dr. Kobayshi was called. I take it first of all a heart rate of 122



1
2
3 in an infant is not terribly slow but it was a good
4 deal slower than this child's had been earlier?

5 A. Yes.

6 Q. And rather than having then
7 a regular rate, which it had been throughout the
8 shift, it is now very irregular, was it?

9 A. Yes.

10 Q. Is that what caused you the
11 concern?

12 A. Yes.

13 Q. So, your note recorded that
14 Dr. Kobayshi was called. We know that Dr. Kobayshi
15 had been in to see the baby at least a couple of
16 times earlier during that shift?

17 A. Yes.

18 Q. And had adjusted the
19 prostaglandin infusion rate?

20 A. Yes.

21 Q. Now, on page 60 there is what
22 I believe to be Dr. Kobayshi's note of what happened
23 when he was called at 3:30 in the morning. He
24 records he was called to see the baby because of
25 bradycardia and irregular heart rate. There had
been a slowing of the heart and an irregularity had
developed as you have told us?



1

2

A. Yes.

3

Q. And he says now the heart rate

4

was down to 102 per minute with ectopic junctional

5

beats, and then he says, "Went further bradycardic to

6

95 a minute and then to ventricular fibrillation".

7

Do you recall that having occurred?

8

A. Yes.

8

Q. It says there was CPR given

9

for 45 minutes with intracardiac adrenelin without

10

success. I take it a Code 25 was called on this

11

child, Mrs. Scott?

12

A. Yes.

13

Q. Do you recall who called the

Code?

14

A. I don't recall.

15

Q. And the arrest team arrived?

16

A. Yes.

17

Q. And were you there throughout

the resuscitation effort?

18

A. Yes.

19

Q. Do you recall what you were

20

doing?

21

A. I was drawing up the drugs.

22

Q. You were drawing up drugs.

23

Once again the effort was unsuccessful.

24

25



1
2 Page 56 there is an arrest note at
3 the bottom of the page. The second paragraph of that
4 note on page 56, Mrs. Scott, it says:

5 "Previous sinus rhythm progressed via
6 junctional rhythm AV block to extreme
7 bradycardia, gasping respirations".

8 Were those observations that you were
9 able to make at the time?

10 A. What, at the time she took a
11 turn for the worst?

12 Q. Yes.

13 A. Yes.

14 Q. And the rest of the arrest
15 effort is summarized on page 57 and resuscitation
16 stopped after 40 minutes and the child was declared
17 dead.

18 Were you surprised at Baby Gardner's
19 sudden and, as it turned out, irreversible decline?

20 A. Well, I was surprised because
21 when I went for my lunch she was all right and when
22 I came back, you know, in an hour and a half or in
23 an hour she took a turn for the worst, I couldn't
24 understand it.

25 Q. Did you ask anybody what could
have happened to send the child into that sudden



1

2

and dramatic decline?

3

A. No.

4

Q. Did you hear any discussion
of what could have happened to her?

5

6

A. There might be but I don't
recall.

7

8

Q. You don't recall it now.

9

Did it occur to you at some time following that
arrest that the events of that night of March 17/18
again paralleled those of the nights when Baby
Gage and Baby Estrella had died; that is to say a
child whom you had not expected to die that night
had been stable, you had gone off for a lunch break
leaving the child with someone else, you had come
back the child is in the same condition and an hour,
and an hour and a half in this case later, the child
goes into a sudden decline and cannot be revived.

10

11

12

13

14

15

16

17

Did it occur to you following Charlon Gardner's
death that same pattern had occurred on two other
particular occasions that you could remember?

18

19

A. Yes.

20

21

Q. Did you draw that parallel to
anyone's attention?

22

A. No.

23

24

25

Q. Did you once again ascribe the



Scott, dr.ex.
(Lamek)

6909

1

2

parallel simply to coincidence?

3

A. And bad luck.

4

Q. And bad luck. Did you on this

5

occasion remark that on each of the three particular

6

occasions that you could recall the person who had

7

been with the child while you were away was Mrs.

Trayner?

8

MS. FORSTER: Mr. Commissioner, I

9

believe the evidence is that she doesn't know who

10

relieved her but she presumes it was Mrs. Trayner.

11

MR. LAMEK: I am sorry, you are

12

absolutely right, we don't know.

13

Q. So, you couldn't draw that

parallel if you couldn't remember.

14

A. No.

15

Q. Well, Miss Forster is right,

16

Mrs. Scott has said she cannot recall who relieved

17

her on this occasion. That is your evidence, isn't

18

it?

19

A. Yes.

20

Q. Do you recall whether you

were relieved by a nurse from 4B's side?

21

A. No. We don't usually relieve

22

on the other side.

23

Q. You don't usually relieve on

24

25



1

2

the other side of the ward?

3

A. No, unless we were very, very

4

busy.

5

Q. It would have been unusual

6

to have been relieved from an RN from the 4B side?

7

A. That's right.

8

Q. Had you been so relieved by

9

an RN from the 4B side would that have been sufficiently
unusual that you would recall it do you think?

10

A. Yes.

11

Q. And I suppose the arrest

12

becomes a matter of argument as to who was left to

13

relieve you on that night. But you have no

14

recollection?

15

A. No.

16

Q. And you did not discuss with

17

anyone the parallel that you saw on that night with

18

A. No.

19

Q. Going off for lunch leaving

20

a stable child, coming back to find a stable child

21

who thereafter rapidly declined?

22

A. No.

23

Q. All right. By the time of

24

Charlon Gardner's death had anyone else remarked upon

25



1

2

3

4

that pattern that you had said you already noticed,
going off to a break leaving a stable child, coming
back having that child turn sour on you?

5

A. Not that pattern but the hours
between 2 and 3:30.

6

7

8

Q. All right, people had begun
to recognize that children were dying in those
early hours of the morning?

9

A. Yes.

10

11

12

13

Q. But so far as you know no one
put together that observation with the one that you
made, that is to say, these are children who were
stable before my break and turned sour when I came
back from my break?

14

A. As far as I know, yes.

15

16

17

Q. All right. Did you administer
any digoxin to Charlon Gardner the night that she
died?

18

A. I don't recall. I could look.

19

20

Q. Well, page 102 is the med
sheet I think. It appears that at 9 o'clock at night
you signed for a dose of digoxin to the child.

21

A. Yes.

22

23

24

25

Q. Are you satisfied that the
dose of digoxin that you administered to the child



Scott, dr.ex.
(Lamek)

6912

1

2

at 9 o'clock in the evening was the prescribed dose?

3

A. Yes.

4

Q. Did you check it with somebody?

5

A. Yes.

6

Q. Do you recall who it was?

7

A. No, I am afraid not.

8

Q. Do you normally check the

dose with the registered nurse?

9

A. Yes, we do.

10

Q. And I take it a registered

11

nurse on your own side of the floor?

12

A. Yes.

13

Q. All right. But you can't

remember who it was that night?

14

A. No.

15

Q. All right. Did you see anyone

16

else - I am sorry, you also administered aldactazide

17

to the child, did you not at 9 o'clock?

18

A. Yes.

19

Q. And again you are satisfied

that that was the prescribed dose?

20

A. Yes.

21

Q. Was that also checked?

22

A. No.

23

Q. You don't have to check

24

25



1
2 aldactazide?

3 A. No.

4 Q. Did you see anyone else
5 administer any medication of any kind to that child
6 prior to the time of her arrest?

7 A. No.

8 Q. Mrs. Scott, I asked you this
9 earlier but I will ask you it again because we have
10 now looked at three particular cases. Do you recall
11 any other child who died in the period from July,
12 1980 to March, 1981, any particular child where that
13 same pattern or sequence of events was repeated, the
14 one that we have seen in the cases of Gage, Estrella
15 and Gardner. You have told us that you had that
16 general impression, you could remember those three
17 particular cases. Can you remember any others?

18 A. Offhand, Fazio.

19 Q. You think Fazio was such a
20 child?

21 A. Yes.

22 Q. I wonder, Mr. Registrar, if
23 we could have the Fazio chart.

24 Fazio died the early morning of
25 February 4th and he was not a child who was under
your care, was he?



1

2

A. No.

3

Q. He was under the care of Miss

4

Nelles I believe?

5

A. Yes.

6

Q. Now, by reference to the chart,

7

by all means if you think it would be of assistance

8

to you, what do you recall about the events of the

9

night that Fazio died that prompt you to say that

10

that was another child where the sequence of events

11

was as we have observed it in the cases of Gage,

Estrella and Gardner?

12

A. Well, I remember Susan Nelles

13

and I were having lunch outside and I think she

14

finished it and she said she was going to go back

15

to the room and I hadn't finished my lunch yet, I

think we were having a late lunch that night.

16

Q. Yes. Now, why is it remarkable

17

that you and Susan Nelles were having lunch together

18

at the same time?

19

A. Because I remember her saying

that she was going back to the room.

20

Q. And she left before you, did

21

she?

22

A. Yes.

23

Q. Now, that's the long night duty

24

25



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Scott, dr.ex.
(Lamek)

6915

1

2

of February 3 to 4 and Miss Nelles had four children
in 418, Fazio and another child, and you had four
children in Room 418?

3

4

A. Yes.

5

6

7

8

9

- - - - -

10

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DM.jc
CC

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Q Mrs. Christie had four in Room 425, one in 423 and two in 426, and there was a relief RN, Miss Olimpo, who had five children in 421. Mrs. Trayner was in charge and had no patients at the time. Your recollection is that Miss Nelles left before you did to go back into Room 418?

A Yes.

Q How is it she only had two children according to this?

A I don't know.

Q She seems to have an easy task that night.

A Maybe there were only two other patients in there.

Q No, you had four in there yourself.

A Oh, I don't know.

Q Six patients in the room and she had two of them. None of the children in 418 I take it were on constant care or shared care or anything of that sort?

A No.

Q So there was no reason why the two of you should not have been out of the room at the same time?



C.2

1

2

A. No.

3

4

5

6

7

MR. LAMEK: Yes, it does.

8

9

10

11

12

MR. BROWN: And going back to the previous night it appears the same, Miss Nelles had the same two children the previous day and Miss Partridge had the same two children. Indeed there may have been a shared care order on those two children.

13

14

MR. LAMEK: It may have been but I am not aware of one. I agree that is an inference one might be able to draw from that.

15

16

17

Q. Do you have a recollection of whether Miss Nelles' patients that night were on shared care?

18

19

A. No, I don't know, I just remember that she wanted to go back to the room.

20

21

Q. Is it your recollection that they were not on shared care, or you don't have any recollection at all?

22

23

24

25

A. No recollection at all.

Q. I'm sorry?



C.3

1

2

A. No recollection at all.

3

Q. They may have been but you don't

4

recall it?

5

A. Yes.

6

Q. Nevertheless she went back to

7

the room before you did?

8

A. Yes.

9

Q. And you said you were having

late lunches that night?

10

A. Yes.

11

Q. Do you recall why that was?

12

A. I don't know. I think most

13

probably it was Yvonne Lyons, she had late lunch too

14

and that is why when the Code was called, and she

15

made the remark "Oh, just when we were having lunch",
and I think that is what made me think.

16

Q. Okay, Yvonne Lyons you think

17

was having a late lunch too then?

18

A. Yes.

19

Q. Were you and she still out

20

having lunch when the Code was called?

21

A. I think I was finished but she
was eating.

22

Q. You were still out at the

23

nursing station?

24

25



C.4

1

2

A. Yes.

3

4

Q. How long after Miss Nelles had gone back to Room 418 was the Code called?

5

6

A. I don't know, one and a half or two hours.

7

8

Q. You still couldn't have been out having lunch?

9

10

A. No, but I wasn't having lunch at that time.

11

12

Q. I am sorry?

A. I wasn't having lunch at that time I was at the nursing station.

13

14

15

Q. Let me get the sequence correctly, I am getting confused. Approximately what time did you and Miss Nelles go and have your lunch that day, that night?

16

A. I don't recall.

17

Q. But it was late?

18

A. Yes.

19

Q. After 1:30 your normal time?

20

A. Yes.

21

Q. Miss Nelles went back to the full room, 418, before you did?

22

A. Yes.

23

Q. How much before you did, roughly?

24

25



C.5

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25

A. I was just going to have my
lunch and she went back.

Q. Okay, you came out to have your
lunch?

A. Yes.

Q. And very shortly after she went
back to the room?

A. Yes.

Q. And about how long after Miss
Nelles went back into the room was the Code called?

A. About one and a half to two
hours.

Q. One and a half to two hours?

A. Yes.

Q. Do you know whether there was -
when you came out of the room, did you come out of
418 to go to your own lunch that morning?

A. Yes.

Q. When you left 418 was there
anyone else in that room, other than patients of course?

A. I don't recall.

Q. You don't recall?

A. No.

Q. If Miss Nelles went back shortly
after you came out into the room there wasn't a great



C.6

1

2

deal of time for someone to be there while neither
one or the other of you was there, is that fair?

4

A. Yes.

5

6

Q Still that is the case where
you remember where I take it prior to the break,
whenever it was, it was your impression that Baby
Fazio was stable?

8

A. Yes.

9

10

11

Q And then an hour and a half to
two hours after the break he suddenly went into a
decline and had an arrest and died?

12

A. Yes.

13

14

Q Is there any other child that
you can remember where the events of his final night
fell into that same pattern?

15

A. No.

16

17

18

19

20

21

22

23

24

25

Q Forgive me a moment, Mrs. Scott,
please. Okay, we passed over a number of deaths which
occurred while you were on duty and I wanted to get
to Charlon Gardner, Mrs. Scott. Let me go back and
ask you what if anything you can recall about them.
You have already mentioned Fazio to me who died the
long night of February 3 to 4; Baby Thomas died the
long night of February 11 to 12. You were on duty
that night and you were assigned to the care of that



C.7

1

2

child, do you recall that?

3

A. Not very clearly.

4

Q. You don't recall him very clearly?

5

A. No.

6

Q. Can you tell me what you do

7

recall about that child and the events of that night,
the night of her death; would it assist you again to

8

have the chart available to you?

9

A. Yes.

10

Q. Does the chart assist you in

11

recalling the events of that night or anything about

12

the child, Mrs. Scott?

13

A. No.

14

Q. It does not particularly?

15

A. No.

16

Q. You have no particular recall

17

then of Jennifer Thomas?

18

A. No.

19

Q. You were also on duty the night

20

of March 6th and 7th when Colleen Warner died, and

21

again you were assigned to care for that child that

22

night; do you have that chart?

23

A. No.

24

MR. LAMEK: I am sorry, Mr. Registrar,

25

I should give you a couple of names at the same time,



CC.8

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why don't I do that. Could we have please Warner, Hines, Gionas, Manojlovich, Pacsai and Inwood. I am sorry, Mr. Registrar, we will try to save you constant trips.

Q. Do you have the Warner chart there, Mrs. Scott? Colleen Warner was your patient the night that she died and she died in Room 418. Do you, with perhaps the assistance of the chart, have any recollection of that child and of the events of the night of her death?

A. I am sorry, are you waiting for me?

Q. Yes, indeed, if you have any recollection now of Baby Warner?

A. She was admitted at about 10 o'clock by Emergency, but I can't recall whether I went down myself and got her, or somebody else got her for me.

Q. Did you admit the child to the ward?

A. Yes.

Q. And having admitted her to the ward what did you then do?

A. Well, I remember she was constantly crying and very irritable and very difficult



CC.9

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to settle, and I spent a lot of time with her, and I didn't have much time to talk to the parents so Susan Nelles took the history for me. I remember the parents asking me - apparently the doctor had explained to the parents that he was going to do some operation or something like that.

Q. Yes.

A. I don't know whether he explained to the parents in the nursing station on 4A or he did that down in Emergency, I can't recall that. The parents were very undecided whether to have the operation or not.

Q. Yes.

A. I told them, they looked very tired so I said I don't know what the doctor told you, I think it is better for you to go the hostel, I think they were staying in the hostel, I am not sure, I said it is better for you to go back now and have a good night's rest and then tomorrow they could ask the doctor again to explain to them what he was going to do.

Q. Surgery had been recommended and they were undecided as to whether to accept the recommendation?

A. Yes.



CC.10

1
2 Q And your very good advice to
3 them was to get some rest and get some more infor-
4 mation tomorrow from the doctor?

5 A Yes, if they were not sure.

6 Q Do you have any recollection of
7 the child's course during that night and prior to the
8 time of her arrest?

9 A At first as I said she was
10 very irritable and very difficult to settle but she
11 did settle down by the time I went to lunch.

12 Q Your nursing note is found on
13 page 55 of the chart and it records, as you have said,
14 that you admitted the baby: "Using 40 per cent
15 oxygen with a hood". You record the vital signs on
16 admission. Then perhaps almost a third of the way
17 through your note: "Apex ranging from 136 to 156
18 and irregular until around 0300 when the rate rapidly
19 dropped to 72 and very irregular with long pauses.
20 Blood pressure dropped to 70 over pulse and Dr. Kantak
21 called."

22 How much time did you spend with
23 this child, from the time of her admission until she
24 got into trouble at 3 o'clock in the morning?

25 A I spent a lot of time before
I had my lunch break because she was so irritable.



CC.11

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2

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Q. Do you recall what time you
went for lunch?

4

A. No, about 1:30.

5

6

Q. Did you look in on the child
when you came back from lunch?

7

A. Yes.

8

Q. And how was she then?

9

A. She was sleeping.

10

11

Q. Do you have any recollection
of the approximate time you got back from your lunch

12

A. No.

13

14

15

Q. Do you recall how long after you
got back from lunch that she got into trouble? We
know she got into trouble at 3 o'clock in the morning.
About how long had you been back when that occurred?

16

17

A. I recall I went in to have a
look at her and I went in to see my other patients.

18

Q. Yes.

19

20

A. And then I went back into the
other room, oh, an hour and a half.

21

Q. As much as that?

22

A. Yes.

23

24

25

-



DD
EMT/PS

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Q. That would suggest you got
back from lunch at about 1:30. Would that be right?

A. Possible.

Q. You had an earlier lunch then.

A. It is possible.

Q. Do you know? Do you recall?

A. No.

Q. But again some time elapsed
between your return from lunch and the events that
you record in your note on Page 55 of the chart?
That is to say that the heart rate dropped very
rapidly to 72, long pauses, became very irregular.
Blood pressure dropped. By 5 minutes past 3 the
apex was hardly audible and at 6 minutes past 3 a
Code 25 was called.

A. Yes.

Q. Some period of time then elapsed
between your return from your break and those
events happening.

A. Yes.

Q. The child was not on any constant
or shared care and therefore there was no need for you
to be relieved when you went for your break. Is that
true?

A. Yes.



Scott
dr. ex. (Lamek)

Q. Do you recall anything else about the events of that night, Mrs. Scott?

A. No.

Q. Can we go back briefly to a case we referred to this morning and that is the case of Kelly Ann Monteith? This is jumping around and I am sorry it is out of sequence. It was the night of Monday, August 18th. You were on duty.

You had a couple of children in 418; three in 421 and one in 426. Miss Nelles was working and she had two patients in Room 418, Monteith and another child.

Let me show you the assignment book for a minute. It is page 105 of tab 89, Mr. Commissioner.

Now the two children for whom Miss Nelles was caring in Room 418 had during the day shift been on shared nursing care as indeed they had the -- sorry, Monteith and another child in 418 had been on shared care the day before as well.

Do you recall whether Miss Nelles' two children in 418 on the night of Monday, August 18th, were on shared nursing care?

A. No, I do not.

Q. You don't recall?

A. No.



1

3

2

Q. Do you recall seeing Miss Nelles
outside Room 418 at any time that night?

3

4

A. No. I am not sure.

5

Q. You have no recollection of
that?

6

A. No.

7

8

Q. Do you recall if Miss Nellès was
present when you went out for lunch? I mean present
at the nursing station when you were out for lunch?

10

A. No.

11

12

Q. Well, let's get that into sequence,
but I see, Mr. Commissioner -- I have not forgotten
the afternoon break time.

13

14

THE COMMISSIONER: All right. We will
take 20 minutes.

15

16

---Short recess.

17

---On resuming after the break.

18

19

MR. LAMEK: Q. Mrs. Scott, we have
talked about Colleen Warner.

20

21

22

23

24

25

On the night of March 7 to 8 Jordan
Hines died. You were relieving on Ward 4B that night
which is, of course, the side of the ward upon
which he died. You were not assigned to care for
Jordan Hines. Do you have any recollection of that



4 2 child or the events of that night leading to the
3 child's arrest?

4 THE COMMISSIONER: Now you say
5 Jordan Hines was on 4B, was he? Is that right?

6 MR. LAMEK: Yes, sir.

7 THE COMMISSIONER: That is right. I
8 think that is right but you have got A on your chart.

9 MR. LAMEK: I think not, sir. That is
10 the CDC category under his name.

11 THE COMMISSIONER: Oh, I beg your
12 pardon. I take it all back. Yes, you are quite right.

13 MR. LAMEK: O. Now, Mrs. Scott, you were
14 relieving on 4B that night were you not?

15 A. Yes.

16 Q. The rest of your team was on 4A
17 but you were working over on 4B that night?

18 A. Yes.

19 Q. But you say you have no recollec-
20 tion of the child or any of the events leading to his
21 arrest?

22 A. No.

23 Q. Did you in the course of the
24 shift that night up until the time of the arrest see
25 on 4B anybody from Ward 4A?

A. Yes.



Scott
dr. ex. (Lamek)

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2

Q. Whom did you see?

3

A. Phyllis Trayner. She came into
the room and looked at the babies.

4

5

Q. Did she come into the room where
you were?

6

7

A. The babies' room and I was
there, too.

8

9

Q. I'm sorry, what do you mean by the
babies' room?

10

A. In 4B.

11

Q. She looked in all the patient
rooms?

12

A. Yes.

13

14

Q. You were in Room -- let me see.
Do you recall what room you were in? I only have you
relieving over on that side.

15

16

A. On 4B?

17

18

19

Q. Yes. You are not shown in the
assignment book as being in any particular room.
Maybe we can look at the assignment book and you will
be able to remember.

20

21

At page 119, Mr. Commissioner, tab 14
on Exhibit 32A.

22

Here we are. You are the RN from 4A.

23

A. Yes.

24

25



1

6

2

Q. Does that mean you were the
relief nurse who is shown as having a child in 411?

4

A. Yes.

5

Q. Two in 414 and one in 410.

6

A. Yes.

7

Q. Because there is another note
RN relief being with Manojlovich. You were not with
Manojlovich that night?

9

A. No.

10

Q. So you had four children.

11

A. Yes.

12

Q. One in 414, two in 411 and one
in 410?

13

A. Yes.

14

Q. You didn't have any child in the
room in which Jordan Hines was which was 431.

16

A. No.

17

Q. When you saw Mrs. Trayner where
was she?

18

19

A. We were in the babies' room
looking at all the babies.

20

21

Q. You say the babies' room, I'm
sorry --

22

A. In 431.

23

Q. 431?

24

25



1

2

A. Yes.

3

Q. You were there at the same time?

4

A. Yes.

5

Q. What time of night was that?

6

A. It was during coffee time.

7

Q. Sort of 10 to 11, that sort of
time?

8

A. Yes.

9

Q. How long did Mrs. Trayner stay
over on 4B side, to your knowledge?

10

11

A. About five minutes.

12

O. All right.

13

A. When she was with me. I don't
know, I can't recall whether she went back there
or not. I don't know.

14

15

Q. You saw her there for about five
minutes, some time around 10 or 11:00.

16

17

A. Yes. We just had a quick look
at the babies.

18

19

Q. And was one of these Jordan
Hines?

20

A. Yes.

21

Q. Do you have any particular
recollection of him at that time?

22

23

A. No.

24

25



1
2 Q. Did you see anyone else from 4A
3 on the 4B side that night or did you see Mrs.
4 Trayner at any other time that night?

5 A. No.

6 Q. I guess you can't help us any
7 further then with the Hines matter.

8 The following night, that is March 8 to
9 9, Baby Gionas died in Room 418 and you were on duty
10 on Ward 4A that night although not assigned to
11 Baby Gionas. Indeed it appears that Mrs. Trayner
12 was caring for Baby Gionas that night.

13 Do you have any recollection of that
14 child or the events leading up to his arrest?

15 A. No.

16 Q. On the night of March 11 to 12
17 two children died, both on 4B side, Manojlovich
18 and Pacsai. You were on 4A that night on duty.
19 Do you have any recollection of either of those
20 children?

21 A. No.

22 Q. Or of the events leading up to
23 their arrests?

24 A. No.

25 Q. The next night, March 12 to 13,
Kristin Inwood died on Ward 4B, and on that night you



1

2

were relieving on Ward 4B although you were not
assigned to care for Kristin Inwood.

3

4

Do you have any recollection of that
child?

5

6

A. No.

7

8

Q. Or of any of the events leading
up to her arrest that night?

9

A. No.

10

11

Q. Did you that night see on 4B
anybody from the 4A side?

12

A. I don't recall.

13

14

Q. You don't recall? That brings us
chronologically to Charlon Gardner whom we have
discussed.

15

16

Moving on down the list you were not on
duty the night that Allana Miller died, were you?

17

A. No.

18

19

Q. Indeed you had not been on duty
since the date of Charlon Gardner's death, according
to the WIN sheets.

20

A. Yes.

21

22

Q. You went off duty on the morning
following Charlon Gardner's death and were not on
duty again until Saturday, March 21 when you
worked the long day shift.

23

24

25

26



1

2

A. Yes.

3

O. Is that right?

4

A. Yes.

5

Q. Therefore you were not on duty

6

when Justin Cook died in the early hours of March
22nd?

7

A. No.

8

Q. You worked on Sunday the long

9

day.

10

A. Yes.

11

Q. I take it you learned of Justin

12

Cook's death when you came on duty Sunday morning.

13

A. Yes.

14

Q. On the long day, Saturday,

15

March 21st, Mrs. Scott, you had been assigned to care
for Justin Cook?

16

A. Yes.

17

Q. Cook was not on constant care

18

until after the blue spell that he suffered at about
6:00 in the evening; is that right?

19

A. Yes.

20

Q. During the day you had Cook and

21

a couple of other patients in Room 418?

22

A. Yes.

23

Q. But after the blue spell, about

24

25



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6 in the evening, you were assigned to provide constant care to him for the rest of the shift, were you not?

A. Yes.

Q. About an hour or so?

A. Half an hour.

Q. We know that Justin Cook went to the catheter lab at about mid-day on the Saturday, didn't he?

A. Yes.

Q. A little before noon I think?

A. Yes.

Q. Who took him to the lab?

A. I did.

Q. And did you stay with him throughout the time that he was there?

A. Yes.

Q. What time did you get back from the cath. lab with him?

A. About 1. 1:15.

Q. 1, 1:15?

A. 1:15 to 1:30.

Q. When did you get your lunch break on the Saturday?

A. Very late.

Q. After you got back from the



1

2

catheter lab?

3

A. Yes.

4

5

Q. Who looked after him while you
were away for lunch?

6

A. When I took the baby back into
the room Marie Mandal and Miss Cooney were there.

7

Q. Yes.

8

9

A. And I left them to settle Justin
Cook and I went to lunch.

10

11

12

Q. Now from the time that you
returned from lunch until his blue spell at about
6:00, did you spend much time with him?

13

A. Yes.

14

Q. What is your best recollection of
his condition through the afternoon?

15

16

17

A. He was irritable. He was crying,
and he was unable to tolerate room air so he has to be
in oxygen hood most of the time.

18

19

20

Q. Yes. Can you tell us what is your
best recollection of what occurred when he had what
we have called a blue spell at about 6:00 in the
evening? What happened then?

21

22

23

24

25

A. I went to supper and on my way
back I went up to 7G to get the Inderal because we
didn't have any suspension, Inderal suspension in the



1

2

ward. So I came back. I gave it to him.

3

4

When I came back from supper Justin Cook's mother was with him and she was holding Justin in her arms.

5

6

Q. Yes.

7

8

9

10

11

A. I gave him the Inderal and he started choking and coughing and choking and his color wasn't so good so I told the mother that I want to put Justin back into the crib because he wasn't having much oxygen with just the mask held to his nose by his mom.

12

13

14

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24

25

O. Yes.

A. I put the baby back on the crib and he started getting very cyanotic and just at that moment Dr. Jedeikin came in and he asked me did I give him any Inderal and I told him I had just given it to him about five minutes ago. And by that time he was really blue, very cyanotic and he said I want to give some more Inderal by I.V. push. So I left the baby with him and went out and went into the medication room to look for the Inderal to be injected into the I.V. tubing.

While I was out apparently he got worse and that is when he had the blue spell and when I was out Marie Mandal went in -- when she saw the doctor



1
2 going into the room she went in after him, and some-
3 body, I think it was Mary Cooney, she got sort of
4 scared and she sort of over-reacted and she pushed
5 the crash cart into the room and when I returned to the
6 babies' room with the Inderal Marie Mandal was drawing
7 up, re-drawing up the drug. She got it from the crash
8 cart.



EE
BB/cr

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Q. Okay. Now, the Inderal that you got from the seventh floor, what kind of Inderal preparation was that?

A. It was a suspension.

Q. It was a suspension. Is that the preparation that is administered orally?

A. Yes.

Q. All right. And how did you get that material from the seventh floor, or how did you bring it down?

A. I put it in a big syringe, a large syringe.

Q. You put it in a large syringe?

A. Yes.

Q. And I gather the oral preparation is produced in bottles, is it?

A. Yes.

Q. So, you draw up what you need into the syringe?

A. I also drew it up for another dose, for the night nurse because I thought, you know, I didn't want them to spend a lot of time looking around for the drug.

Q. All right, you drew up two syringes of the oral preparation?



1

2

A. No, just one.

3

Q. Oh, one.

4

A. Yes.

5

Q. You drew up twice as much

6

as you needed?

7

A. Yes.

8

Q. Okay, in one syringe?

9

A. Yes.

10

Q. From the oral preparation of

Inderal?

11

A. Yes.

12

Q. And you took that down to the

fourth floor?

13

A. Yes.

14

Q. And you administered a dose

15

orally to Justin Cook?

16

A. Yes, I took what I wanted into

17

a medicine cup and then drew it up again and left

18

the rest in the fridge.

19

Q. Okay. You pushed out of the

20

syringe enough for one dose into a medicine cup?

21

A. Yes.

22

Q. Drew that up into another

syringe?

23

A. And gave it to Justin Cook.

24

25



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Q. And used that, the second syringe, to administer orally the dose of Inderal?

A. To Justin Cook, yes.

Q. What did you do with the original syringe that still had some Inderal in it?

A. I put a label on the drug, what was it and the strength and I put it in the fridge.

Q. You put that in the fridge, okay. And you were satisfied that what you brought down from the seventh floor was Inderal?

A. Yes.

Q. All right. How do you know?

A. Because I got it myself.

Q. I am sorry?

A. I got it myself.

Q. From a bottle clearly marked?

A. From upstairs, yes.

Q. All right.

THE COMMISSIONER: Do I understand this, I am getting confused, I guess it's the long layoff. You got some Inderal before the doctor was called, is that right?

THE WITNESS: Yes.

THE COMMISSIONER: And you gave the



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Inderal when the baby was in his mother's arms, is
that right?

3

4

THE WITNESS: Yes.

5

THE COMMISSIONER: And then you put
the baby down in the crib?

6

7

THE WITNESS: And the doctor walked
in.

8

9

THE COMMISSIONER: And what happened
then?

10

11

THE WITNESS: The doctor came in at
the same time.

12

13

THE COMMISSIONER: Had you called the
doctor?

14

THE WITNESS: No.

15

16

THE COMMISSIONER: I see, all right.
And then after that the doctor came in and said he
wanted to give him some more Inderal?

17

THE WITNESS: Yes.

18

19

THE COMMISSIONER: And then you went
out.

20

21

THE WITNESS: Went out to get the
valve.

22

23

THE COMMISSIONER: To the seventh
floor again?

24

25

THE WITNESS: No, the medication room.



1
2 THE COMMISSIONER: Why did you have
3 to go to the seventh floor in the first place?

4 THE WITNESS: We didn't have any
5 suspension.

6 THE COMMISSIONER: I see.

7 THE WITNESS: To give by mouth.

8 THE COMMISSIONER: Oh, I see, I see.

9 THE WITNESS: But we had the one
10 for injection into the vein.

11 THE COMMISSIONER: Yes. So, you could
12 then get the intravenous Inderal from the medication
13 cupboard?

14 THE WITNESS: Yes, from the medication
15 cupboard.

16 THE COMMISSIONER: Yes, all right.

17 MR. LAMEK: Q. Yes, the order for
18 Justin Cook's Inderal or Propranolol was for the
19 oral preparation, was it not?

20 A. Yes.

21 Q. He was to receive the drug
22 PO, orally?

23 A. Yes.

24 Q. And it was that that you
25 were missing on the fourth floor, the oral preparation
that you had to get from the seventh floor?



1

2

A. That's right.

3

Q. Okay. You brought it down

4

as you have told us and divided the amount that you

5

brought into two doses, put one in the refrigerator

6

in the syringe and drew up into another syringe the

7

dose that you were going to administer at 6 o'clock?

8

A. Yes.

9

Q. You administered that and then

10

the child began to cough and choke and spit it up?

11

A. Yes.

12

Q. And turned blue?

13

A. Not too blue but cyanotic,

yes.

14

Q. Okay. So, you took him to

15

his mother and put him in the crib?

16

A. Yes.

17

Q. And then Dr. Jedeikin arrived?

18

A. Walked in, yes.

19

Q. All right. Asked if you had

20

given the Inderal and you said yes but I assume told

21

him that the child had coughed a lot of it up?

22

A. Yes.

23

Q. And he said he wanted to

24

give some more?

25

A. Some more.



1

2

Q. But this time by IV push?

3

A. Yes, he was going to give

4

it.

5

Q. Okay. Now, you had the intra-

6

venous preparation in the medication room on the

7

third floor?

8

A. That's right.

9

Q. So, you went for that?

10

A. Yes.

11

Q. Before you got back with it

12

someone had taken Inderal from the crash cart you say?

13

A. Yes.

14

Q. And Jedeikin had administered

15

it.

A. Marie Mandal, yes.

16

Q. Marie Mandal had taken the IV

17

preparation from the crash cart?

18

A. And was drawing it up.

19

Q. And was drawing it up for

20

Jedeikin to administer it?

21

A. Yes.

22

Q. How many vials of Inderal

23

did you bring back from the medication room?

24

A. Just one.

25

Q. Just one. Do you know what



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(Lamek)

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happened to it?

A. I put it back in the crash

cart.

Q. You replaced it, you replaced
the one that Marie Mandal had taken from the crash
cart?

A. Yes.

Q. All right. Did you at any
time have anything to do with or did you see one or
more vials of Inderal taped to Justin Cook's bed?

A. I didn't see, I didn't actually
see it.

Q. And I take it therefore you
certainly did not do that yourself?

A. No.

Q. All right. Now, from the time
of the blue spell Justin Cook was placed on
constant care nursing and you were assigned to
provide that constant care?

A. Yes.

Q. And that was getting close
to the end of the shift, you didn't have to do that
for very long?

A. No.

Q. How was the baby when you went



9

1

2

off shift that night?

3

A. His condition was improved and

4

he settled.

5

Q. His condition was improved and

6

he had settled?

7

A. Yes.

8

Q. All right. At the end of the

shift you were relieved by Miss Nelles I believe?

9

A. Yes.

10

Q. And she was assigned to

11

provide constant care for Cook for the long night

12

shift that was then started?

13

A. Yes.

14

Q. Did you report to her upon the

child's condition when she came on and you went off?

15

A. Yes.

16

Q. You then went off shift?

17

A. Yes.

18

Q. Did you then leave the Hospital?

19

A. Yes.

20

Q. When you came on duty for

21

the long day shift on Sunday, March 22nd, did you

22

then learn that Justin Cook had died during the

23

night?

24

A. Yes.

25



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(Lamek)

1

2

Q. Who told you?

3

A. The night staff.

4

Q. You don't remember who in

particular?

5

A. Either Susan or Phyllis, I

6

don't know.

7

Q. What was your reaction to that

8

news?

9

A. Well, I was rather surprised

10

he had died but at the same time I wasn't surprised.

11

Q. Because he was a sick child

12

I take it?

13

A. Yes, yes.

14

Q. What then caused you any

measure or surprise?

15

A. Well, I didn't really expect -

16

I mean, he had blue spells before he came to the

17

Hospital and apart from the blue spell he wasn't that

18

sick that day.

19

Q. All right. Did you learn

20

at some time on Sunday, March 22nd that post mortem

21

blood samples had been drawn from Justin Cook?

22

A. I don't recall.

23

Q. You don't recall anyone telling

you that?

24

25



1

2

A. No.

3

4

Q. Did you ever learn that post mortem blood samples had been drawn from Justin Cook shortly after his death?

5

6

A. I can't be sure.

7

8

9

10

Q. Okay. Now, there were a number of things however that you did learn when you came on duty on Sunday, March 22nd. You learned I take it that the digoxin had been locked up and was now being treated as a controlled drug?

11

A. Yes.

12

13

Q. You learned that. You learned there were supervisors on the floor?

14

A. Yes.

15

16

Q. Throughout the day?

17

18

A. Yes.

19

20

Q. You learned that it was the supervisor not the team leader who now had the keys to the medications' cupboard?

21

A. Yes.

22

23

Q. All right. What was your reaction to all of that?

24

25



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A. I was rather confused. I didn't know what was happening and nobody gave me the right answer, nobody knew what was going on.

Q. Whom did you ask?

A. Marie Mandal because she was a team leader, I thought she might know a lot more than I did.

Q. Yes.

A. And she didn't know.

Q. Did you ask anyone else what was going on and what was the explanation for all of this?

A. No.

Q. Did you ask the supervisor?

A. Well, she just said that she has to do what she is told and it is for our own protection.

Q. And were the nurses on the floor discussing amongst themselves what could be going on here, wondering why all these things had happened?

A. We did wonder why because when I learned that digoxin was already locked up before it was supposed to be locked up before Justin Cook died, I thought maybe, you know, I was surprised



1

2

because I thought this had to do with Justin and
Justin was not on digoxin.

3

4

Q. Yes.

5

6

A. But then I later learned
that it was already locked up before Justin Cook
died, so, it couldn't have anything to do with Justin
Cook.

8

9

Q. It wasn't his death that caused
all these things you thought?

10

A. No.

11

12

Q. All right. Well, let's look
at that particular feature of it. Were you concerned
that the digoxin was now locked up?

13

A. Yes, I was.

14

15

Q. Did anything cross your
mind as an explanation for that?

16

17

18

19

A. Well, there were so many
explanations from different people and one of the
explanations was that maybe the manufacturers had
made a mistake in the concentration and maybe it was
stronger than what it was supposed to be on the label

20

Q. Yes.

21

22

23

24

25

A. And I was under the impression
that they actually took it off from the ward to be
tested and I thought they brought other new bottles;



1

2

that's what I thought at the time.

3

4

5

6

Q. Okay. Now, that might have explained to you why the digoxin was locked up but it wouldn't have explained the presence of supervisors on the ward, would it?

7

8

9

10

11

12

A. No.
Q. What explanation did you come to for their presence, if any?

13

14

15

A. Well, they kept saying it was for our own protection, so, I thought maybe some of the nurses had made a mistake or gave a double dose or something like that.

16

17

Q. Well, did it not occur to you that for some reason that you could not identify the nurses on the fourth floor were having a very close eye kept on them?

18

19

20

21

22

A. Well, we didn't like to think about that.

23

24

25

Q. No, but it was pretty obvious was it not. You got supervisors there and they've got the keys to the cupboard and they are checking your dosages, it was pretty clear wasn't it that they were keeping a pretty close eye on the nurses on the floor?

A. Yes.



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Q. And that must have been very
troubling to you?

A. Yes.

Q. And no one would tell you
why?

A. No.

Q. Did you learn at some point,
Mrs. Scott, that Baby Pacsai had died with a high
digoxin level?

A. I'm not quite sure when I
learned it.

Q. But you did learn that at some
time?

A. Yes.

Q. And did you learn that an
Inquest was probably going to be held on Kevin
Pacsai?

A. I think I heard something
about that at the meeting at Liz' house but I'm
not quite sure.

Q. At Mrs. Radojewski's house
on the Monday night?

A. Yes.

Q. You have no recollection of
hearing about either of those things prior to the



1
2 Monday night, the 23rd, either of those things being
3 the high digoxin level in Pacsai and the probability
4 of an inquest?

16 A. I might have but I don't
5 recall.

6 Q. All right. When you did
7 learn that Kevin Pacsai had died with a high digoxin
8 level and that an inquest was probably going to be
9 held, what was your reaction to that?

10 A. Well, at a meeting when we
11 learned that the Coroner had been called in and
12 Susan Nelles was the one that was involved, so, we
13 thought she might be in some sort of trouble, maybe
14 she had given a double dose or something like that,
that's what we thought.

15 Q. You are talking now about
16 the meeting on the Monday night?

17 A. Yes.

18 Q. What was your reaction to all,
19 that?

20 A. My reaction?

21 Q. Yes. Did it occur to you
22 then on the Monday night when you learned those things,
23 as you think you did, did it occur to you then that
24 information, coupled with what you had learned on the
25



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Sunday, that is to say the digoxin was now locked up and supervisors were watching you all, did it occur to you then that digoxin may have had something to do with some of the deaths on the floor?

A. To a certain extent, yes.

Q. Did you think of any particular deaths in which digoxin might have been involved?

A. No, just general.

Q. Did you express that thought to anybody on the Monday night?

A. No.

Q. Was there any discussion along that line among other people that you overheard on the Monday night?

A. About what?

Q. Well, did you hear anyone wondering whether digoxin may have been involved in the deaths of some of these children?

A. Well, we must have discussed it at some point because I remember Susan saying that she was very positive that she had given the right dose to Baby Pacsai.

Q. Yes.

A. Because she says that she



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4

remembers seeing the plunger in the syringe where the digoxin was drawn up, it didn't come all the way out.

5

6

Q. All right. Meaning that I take it that she had a less than full syringe, a small dose?

7

8

A. Yes.

9

10

Q. And she was satisfied that the dose that she had administered to Baby Pacsai was the correct one?

11

12

A. Yes.

13

14

15

Q. All right. But then did you hear any talk or did you discuss with anybody at the meeting on Monday night at Mrs. Radojewski's house the possibility that digoxin may have been involved in the deaths other than Baby Pacsai's?

16

17

18

A. I think, I don't know who mentioned it, but I think we mentioned about Allana Miller.

19

20

21

Q. Allana Miller?

22

23

24

25

A. Allana Miller and Justin Cook, but whether we - I didn't ask whether there were any digoxin levels in there.

Q. All right.

A. But Mary Costello and Liz



1
2 wouldn't say anything.

3 Q. They wouldn't say anything?

4 A. They wouldn't say anything.

5 They said the only thing we can tell you is that
6 the Coroner has been called in regarding Baby Pacsai.

7 Q. All right. I take it from
8 what you have said that you did not know even at the
9 meeting on Monday night that Baby Miller had had a
10 high digoxin level when she died?

11 A. No, I didn't.

12 Q. And you didn't know then that
13 Baby Cook had had a high digoxin level when he died?

14 A. Not at that time.

15 Q. You subsequently learned
16 that, those things, about Miller and Cook?

17 A. Yes, when Susan was arrested.

18 Q. Not before then?

19 A. No.

20 Q. As far as the meeting at
21 Mrs. Radojewski's house was concerned on the Monday
22 evening, how did you learn about that meeting, who
23 invited you?

24 A. She rang me up.

25 Q. Who did?

A. Liz.



1

2

Q. Mrs. Radojewski?

3

A. Yes.

4

Q. Called you up during the day
on Monday?

5

6

A. I don't know what time she
called me but she called me at home.

7

8

Q. All right. And she invited
you to go to the meeting?

9

A. Yes.

10

11

Q. Did she tell you what the
meeting was going to be about?

12

A. She said we are going to
discuss recent events.

13

14

Q. Recent events?

15

A. Yes.

16

Q. All right. You hadn't worked
on Monday, March 23rd?

17

A. No.

18

Q. You had not been scheduled to
work?

19

20

A. It was my regular day off.

21

22

Q. Yes. You had worked the day
on Sunday, you had gone off duty at 7, 7:30 Sunday
evening and you had not been in the Hospital on the

23

Monday I take it?

24

25



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21

1

2

A. Yes.

3

Q. And you were called at home

4

and invited to this meeting at Liz Radojewski's

5

house that night?

6

A. Yes.

7

8

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Q Indeed you were not scheduled to work on Tuesday, March the 24th either, were you?

A. No.

Q After your long day shift on Sunday, March 22nd the next scheduled shift that you had was to be the long day on Wednesday, March the 25th, that was your regular team, Mrs. Trayner's team, wasn't it?

A. Yes.

Q Were you told at some point not to report for duty on the Wednesday?

A. Yes.

Q Do you recall when and by whom you were told not to come in on Wednesday?

A. I think at the meeting.

Q You think at the meeting?

A. Yes.

Q On the Monday night?

A. Yes.

Q By Mrs. Radojewski?

A. Yes.

Q Do you have a clear recollection of being told that on the Monday night?

A. No.

Q Was any explanation given to



FF.2

1

2

you as to why you should not come in to work on
Wednesday?

3

4

A. Well, all she said was we were
under too much stress.

5

6

Q Did you have any trouble
agreeing with that?

7

8

A. Yes.

9

Q You didn't think you were under
too much stress?

10

A. Yes, I was.

11

Q You did agree with her?

12

A. Yes.

13

Q When did you return to duty?

14

A. The following Monday.

15

Q Which would be the 30th?

16

A. Yes.

17

Q Let's just go back to the Monday
evening meeting for a moment, please, if we may. What
time did you get to Mrs. Radojewski's house?

18

A. About 7:30.

19

Q And you stayed until what time?

20

A. I didn't stay very long, about

21

10:30.

22

Q Was the meeting already in

23

progress when you arrived, were there people already
there talking?

24

25



FF.3

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2

A. Yes, but we were waiting for
the girls who were working on the long day.

4

Q The day shift girls had not
arrived yet?

5

6

A. Yes.

7

Q And can you give me your best
recollection of who was there?

8

9

A. Susan was there, Phyllis was
there, I think Shelly McCord was there, I don't know --

(2)

10

THE COMMISSIONER: Yes, Mr. Brown?

11

12

MR. BROWN: I don't want to be an
obstructionist, but we did have a ruling about a week
ago in terms of Phase I and Phase II. I certainly
understand that part of the meeting may be relevant
to Phase I, but I am having a bit of difficulty in
seeing what is relevant to Phase I and what is
relevant to Phase II.

13

14

15

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17

THE COMMISSIONER: Well, it is pretty
innocent so far I think, isn't it?

18

19

20

MR. BROWN: It is, I just wanted to
be clear that that distinction remains and is in force
and applies to counsel.

21

22

23

THE COMMISSIONER: It is, and it
remains in force. Mr. Lamek has heard you, I don't
know what --

24

25



FF.4

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MR. LAMEK: I will try not to --

3

THE COMMISSIONER: Transgress?

4

MR. LAMEK: Transgress.

5

6

THE COMMISSIONER: Well, I don't mind innocent transgression, but the trouble is they are not always innocent, they start off innocent but they get awfully guilty before I know what has happened.

7

8

9

MR. LAMEK: You know I wouldn't do that, Mr. Commissioner.

10

11

12

13

Q What do you recall of the discussion at the meeting on the Monday night? What topics were discussed first of all, that you can remember and that were discussed in your hearing?

14

15

A Other than what I have just told you I couldn't remember.

16

17

18

Q What you have just told me was that there was mention of the Pacsai situation, and Susan Nelles saying she was sure she had administered the right amount of drug.

19

20

21

A Yes.
Q I can't recall that you really told me anything else that happened on the Monday night.

22

23

24

25

THE COMMISSIONER: While we are talking about Mr. Brown's objection I think it would be important, you know more about this naturally than



FF.5

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I do, that may not always be the case but it is right now, and if there is some way we can avoid - is there any way we can avoid that by asking Mrs. Scott to come back in Phase II? Is there anything --

6

7

8

9

10

MR. LAMEK: I don't know that going further or stopping short of the Monday evening meeting is going to have any bearing on that, Mr. Commissioner. I think if Mrs. Scott is required to come back in Phase II it is with respect to subsequent conversations.

11

12

13

14

15

THE COMMISSIONER: If she is, if it can be avoided by one or two relatively innocent questions I would be all for it and I am sure Mr. Brown would be too, but I don't know, you know more than I do.

16

17

MR. LAMEK: I think at this stage, Mr. Commissioner, I am inclined not to stray and to avoid a reappearance of Mrs. Scott.

18

19

20

21

22

23

24

25

THE COMMISSIONER: All right.

MR. LAMEK: I think there are matters subsequent in time to March 23rd about which we may need to hear from her again rather than properly hear from her now.

Q Let's move on from that meeting, Mrs. Scott. There is just one other area that I really



FF.6

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want to get into with you and I think we can do it before the end of the day. We have heard here of an incident involving you in the late summer of 1981, an incident involving salad and some pills and that sort of thing. Do you know the incident to which I refer?

8

A. Yes.

9

Q. Can you give me your best recollection on when that incident occurred?

10

A. The first call?

11

12

13

14

Q. I am thinking for the moment about the incident of the salad and the pills and the soup and that particular incident, I would like to work backwards or forwards from that point if we can fix it.

15

A. Some time in August.

16

Q. Some time in August?

17

A. The end of August and beginning of September, I don't know.

18

19

Q. You can't be any more precise than that?

20

A. No.

21

22

Q. You asked me a question a moment ago about calls. Did you receive telephone calls at about that time?

23

A. Not me but my kids.

24

25



FF.7

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Q Your children received telephone calls?

A Yes.

Q Was it in some way related to the events of the nine months in which we are interested?

A Yes.

Q And to the deaths of the children in whom we are interested?

A Yes.

Q What is your information as to when - how many calls were there, as you understand it?

A Two and then later on I learned there was three.

Q You thought two and later on you learned there was a third?

A Yes.

Q Were these all prior to the pill in the salad incident?

A I'm not quite sure.

Q Was any of them prior to the pills in the salad incident?

A I don't think so.

Q You think the phone calls came after the incident of the salad?



FF.8

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THE COMMISSIONER: Just a moment.

3

Yes, Mr. Rosenberg?

4

5

MR. ROSENBERG: Mr. Commissioner, I think perhaps the witness is just a little confused, and we know the dates, so if Mr. Lamek wants to lead.

6

7

MR. LAMEK: I only have the one.

8

MR. ROSENBERG: Oh, I have them all here.

9

10

THE COMMISSIONER: They are all in the preliminary, the list, that is 32A, is it, 32B?

11

12

MR. ROSENBERG: I am looking at this, all I am suggesting is --

13

14

15

16

17

THE COMMISSIONER: The problem about that is we have just accepted that and I don't know that it matters, it probably doesn't make a great deal of difference. But if that is a fact, I agree with Mr. Rosenberg, nobody is disputing the dates and it probably would be easier just to assume it.

18

19

20

21

22

MR. LAMEK: It would except unhappily Mr. Commissioner, I know that Mrs. Scott has no independent recollection of two of the three dates, and I really don't think I can properly lead her with a suggestion as to a date on which she has no particular recollection.

23

24

25

THE COMMISSIONER: Well, can I ask



FF.9

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this. Is it going to make any real difference
whether --

3

4

MR. LAMEK: Probably not, no, probably
not.

5

6

THE COMMISSIONER: Then I suggest
we put it, we assume for the moment until we hear to
the contrary that the date set forth in Tab 76 of 32B
are correct.

7

8

9

MR. LAMEK: Thank you, sir.

10

THE COMMISSIONER: All right.

11

MR. LAMEK: Q Mrs. Scott, it is our
understanding then, from other sources, that after about
the middle of June of 1981 there were certain calls
made to you at your house in which when you picked
up the telephone nothing was said or heard, is that
fair?

12

13

14

15

16

A. Yes.

17

Q How many such calls were there,
do you know?

18

19

A. About three.

20

Q And then about the third or
fourth week of August it is your understanding, I
believe, that your children received you thought two
telephone calls?

21

22

23

A. Yes.

24

25



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Q. What is your information as to what if anything was said in those telephone calls?

A. Well, they were all the same "Baby killers Trayner and Scott must die".

Q. "Baby killers Trayner and Scott must die", your children reported to you receiving those calls?

A. Yes.

Q. What was your reaction to that?

A. The first time I was working on days and my son rang me up and he said Mom, be careful, someone is going to kill you. So you know, I didn't know what to think.

Q. Yes.

A. And I told Phyllis, she was the team leader, and she told the supervisor and I don't know what happened, whether the police came or not, I can't recall.

Q. Yes. Did you do that same thing after the second call?

A. The second call, yes, I did the same thing.

Q. Were you concerned by the messages that your children relayed to you?

A. Yes.



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Q. Other than reporting it to Mrs. Trayner did you report them to or discuss them with anybody else?

A. Some of the girls, all the girls working that day.

Q. You are not sure whether those calls were received before or after the salad incident?

A. No.

Q. Give me your best recollection please of what I call the pills in the salad incident, what happened at that time from the first moment when you went out to lunch until you wound up at the hospital across the street. Can you tell me in your own words what happened according to your recollection?

A. To the best of my recollection I remember sitting down and I was just going to eat my salad and Phyllis came in and sat beside me on my left. She had soup and she wasn't eating the soup. So afterwards she said if you like it you can have some of my soup. She had a spoon so I took a spoon and stirred it, I didn't stir very well, just to see what was it and I saw some noodles and chicken, so I took one or two teaspoonsful and I didn't like it.

THE COMMISSIONER: I am sorry, you will have to speak louder, what was that?



FF.12

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2

THE WITNESS: I took one or two
teaspoons of the soup.

4

THE COMMISSIONER: Of her soup?

5

THE WITNESS: Yes. And I told her
as much as I was hungry I am not that hungry to have
cold chicken soup.

7

THE COMMISSIONER: I am sorry, why
were you stirring her soup?

9

THE WITNESS: Because I didn't know
what it was.

10

11

MR.LAMEK: I think Mrs. Scott has
said Mrs. Trayner had invited her to have some of it.

12

13

THE COMMISSIONER: Oh, I see.

14

MR. LAMEK: Q. Can we go back a
minute, Mrs. Scott, on this. You had brought lunch
from home that night?

15

16

A. Yes.

17

Q. And you had put it in the
refrigerator?

18

19

A. Yes.

20

Q. Had you just brought salad?

21

A. I brought some sandwiches too.

22

Q. You had salad and sandwiches.
The salad was in a plastic container, I guess?

23

A. Yes.

24

25



FF.13

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Q. Did you have salad dressing?

3

A. No.

4

Q. None at all?

5

A. No, I brought that separately.

6

Q. Okay, the salad dressing you brought separately in another container I take it?

7

A. Yes.

8

Q. What kind of dressing was it

9

as a matter of interest, do you remember?

10

A. Most probably Italian dressing

11

or cucumber dressing, that is the only dressing I take.

12

Q. Okay, that is fair enough.

13

THE COMMISSIONER: I am sorry, Italian?

14

MR. LAMEK: Italian or cucumber.

15

Q. It wasn't Russian though. So you went to the refrigerator and you got your lunch?

16

A. Yes.

17

Q. Did you take out the salad and

18

the dressing and the sandwiches all at the same time?

19

A. I didn't take the sandwiches, just the salad and the dressing.

20

Q. You took the salad and the

21

dressing?

22

A. Yes.

23

Q. Did you go to the table at the

24

25



FF.14

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back of the nursing station?

3

A. Yes.

4

Q. And you sat down and you were going to eat your salad?

5

A. Yes.

6

7

Q. At that time was Mrs. Trayner present at the back of the nursing station?

8

9

A. She came, I was sitting down and eating my salad and she came and sat beside me.

10

11

Q. Was anybody else there when you sat down with your salad?

12

A. I don't recall.

13

14

Q. You opened up the container of salad and what did you do, put the dressing on it?

15

A. Yes.

16

17

Q. Did you mix it up?

A. Yes.

18

19

Q. Did you see anything in your salad when you mixed it up?

A. No.

20

Q. It appeared to be salad as you had brought it from home?

21

A. Yes.

22

23

Q. And then you began to eat the salad, and Mrs. Trayner came?

24

25



FF.15

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2

A. Yes.

3

Q. And sat down beside you?

4

A. Yes.

5

Q. Did she have her soup with her
at that time?

6

A. Yes.

7

Q. Again in a plastic container?

8

A. Yes.

9

Q. And she sat down and did she
begin to eat her soup?

10

A. I don't know whether she ate her
soup or not, I don't recall.

12

Q. And she invited you to have some
of her soup, did she?

13

14

A. Yes.

15

Q. Did you offer to trade her some
salad for it?

16

17

A. Yes. I said you can have some
of my salad.

18

Q. Okay. Then you picked up the
-spoon and you stirred Mrs. Trayner's soup to see what
was in it?

20

21

A. Not too much.

22

Q. And what did you see in it?

23

A. Some chicken and noodles.

24

Q. You didn't see any pills in it?

25



FF.16

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2

A. No.

3

Q. You tried the soup and it was

4

cold, you say?

5

A. Yes.

6

Q. Did you ask her why she had

7

cold soup for lunch?

8

A. She mentioned something about

the microwave not working, or something.

9

THE COMMISSIONER: Do you have a

10

microwave at the Hospital?

11

THE WITNESS: Yes, two of them.

12

THE COMMISSIONER: I see. Were they

13

on the floor?

14

THE WITNESS: No, on the service

floor and on the main floor.

15

MR. LAMEK: Q. Which floor is the

16

service floor, Mrs. Scott?

17

A. I don't know.

18

Q. Is it down or up from the 4th

19

floor?

20

A. The main floor.

21

Q. It is below the main floor?

22

A. Yes.

23

Q. So you have at least got to go

down to the main floor and maybe to the service floor

24

25



FF.17

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to get in to the microwave ovens?

3

A. Yes.

4

Q. And she said the microwave

5

wasn't working?

6

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8

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Q. And hence her soup wasn't hot?

3

A. That is what she said.

4

Q. You didn't like the idea of
cold chicken soup you say?

5

A. No.

6

Q. Okay. What happened then?

7

A. Then the doctor came. I was
expecting him.

8

9

Q. What did the doctor come for?

10

A. To start an IV, intravenous on
a baby that I was looking --

11

12

Q. You were looking after a patient,
an IV had to be started?

13

A. Yes.

14

Q. And you called for the doctor to
come to do that?

15

16

A. Yes.

17

Q. And of course he came while you
were having your lunch?

18

19

A. Yes.

20

Q. Did you go off to help with that
job?

21

A. Yes. When I saw him coming I
got up and left the nursing station.

22

23

Q. Did you leave your salad on the

24

25



GG 2

1

2

table?

3

A. Yes.

4

Q. Who was there when you left do
you remember?

5

A. Phyllis was there.

6

7

Q. Do you remember anybody else
was there?

8

A. No.

9

Q. Did you cover up the salad or
did you just leave it as it was?

10

11

A. No, I left it as it was and I
told her she could have some if she liked.

12

13

Q. All right. You told her she
could have some if she liked.

14

How long were you away with the doctor?

15

A. About 10, 15 minutes.

16

Q. Ten or 15 minutes. Okay. Then
did you go back to the nursing station to finish your
lunch?

18

19

A. No.

20

Q. What did you do then?

21

A. While I was still - while the
doctor and I were still looking for a vein --

22

Q. All right.

23

A. -- on the baby, one of the

24

25



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nurses came into the room and she said you have to go out, you know, there is something terrible happening outside. You have to go out.

Q. Do you recall who it was who came into the room to say that to you?

A. Mary Lynne Barnett.

Q. Lynne Barnett?

A. Yes. She was the one who replaced Susan Nelles.

Q. All right.

A. On the team.

Q. Lynne Barnett came in and said you have got to go outside there is something terrible happening?

A. Yes.

Q. All right.

A. So she took over.

Q. Did you ask her what it was?

A. She wouldn't tell me. She was quite agitated. She say you just go out.

Q. Did she stay with the doctor --

A. Yes.

Q. -- when you went out then?

A. Yes.

Q. And then you went out in fact to



GG 4

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2

the nursing station?

3

A. Yes.

4

Q. What did you find then?

5

A. Well, Phyllis was crying.

6

Sitting down there and crying and pushing away the salad and making movements she wanted to push the salad and soup away as if she was afraid of them.

8

Q. Yes?

9

A. And I think Mary Jean Halpenny

10

was there and I asked her what happened and she said

11

look into your salad and I looked into my salad and I

12

saw these pills and she say look into Phyllis' soup.

13

So I did and I saw some pills there.

14

Q. Now when you say you looked into

15

your salad did you have to stir it around at all to see the pills?

16

A. Yes, I did. I just stirred it -

17

I think by the time I went out it has been stirred

18

many times by the other nurses.

19

Q. I think that's quite likely.

20

Do you know what the pills were in

21

your salad?

22

A. Somebody said it was Inderal.

23

Q. Do you recognize them as

24

Inderal?

25



GG 5

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A. I couldn't recognize them but apparently it is written down. The word Inderal was written down on the tablets.

Q. Written on the pill?

A. Yes.

Q. What colour were they?

A. Sort of orangey pink.

Q. That is why I wanted to know what kind of salad dressing you were eating. They were orangey pink?

A. Yes.

Q. And how many of them did you see in your salad?

A. About five or six.

Q. Were they mushy and dissolved or were they dry or what were they?

A. No, they were not mushy. They looked as though it had just been put there.

Q. They were quite dry and whole, were they?

A. Well, one or two had salad dressing on it.

Q. Are you satisfied that they had not been there at the time you put the dressing on your salad and mixed it up?



GG 6

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A. Yes.

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MR. ROLAND: I know Mr. Lamek is going to ask for some, and I have two kinds. They are both Propranolol. One has written on it Inderal and it was the kind that was available in the hospital at the time. It is no longer available. There is a different brand name used now, and I have got the other brand as well, called Apotex.

THE COMMISSIONER: Well, I take it --

MR. ROLAND: If Mr. Lamek wants them.

THE COMMISSIONER: He might look at them but I am not sure the new brand is going to be much help to us.

MR. LAMEK: No, if I could have the one that was in use at the time.

MR. ROLAND: That is the 10 milligram size and I think is the size that has been referred to. There is also a 40 milligram size. It is green rather than a sort of pink colour. I don't think that is the one that has been referred to.

MR. LAMEK: Q. What Mr. Roland has provided to me, Mrs. Scott, interestingly enough in a jar marked Boots Drug Stores, are some orangey tablets which even my tired old eyes can see have something written on them and I think it is Inderal.



1
GG 7 2 Do you recognize those as being tablets
3 of the kind you found in your salad?

4 A. Yes.

5 Q. Those are they, are they?

6 A. Yes.

7 Q. Indeed there are six in this
8 thing and you say you found about half a dozen?

9 A. Yes.

10 Q. Well, I suppose --

11 THE COMMISSIONER: What are they
12 called?

13 MR. LAMEK: Inderal tablets, 10
14 milligrams.

15 THE COMMISSIONER: Exhibit 384.

16 --- EXHIBIT NO. 384: Inderal tablets,
17 10 milligram.

18 MR. LAMEK: Q. Then you say you
19 looked in Mrs. Trayner's soup?

20 A. Yes.

21 Q. How did you do that? Did you
22 stir that around or did you just --

23 A. Stirred it around with a spoon,
24 same spoon.

25 Q. Which same spoon, I am sorry?

A. That I had - that I tasted the



GG 8

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soup with.

3

4

Q. Okay. Not the instrument you
had stirred your own salad around with?

5

A. No.

6

7

Q. All right. Did you see pills in
that soup?

8

A. Yes.

9

Q. Same pills that you found, same
kind of pills you found in your own salad?

10

A. Yes.

11

12

Q. How many of those did you see
approximately?

13

A. About four or five.

14

15

16

Q. All right. And you had not seen
anything of that sort on the earlier occasion when you
looked at Mrs. Trayner's soup before you went out to
see the doctor?

17

A. No.

18

19

20

Q. Did those pills appear to be in
any advanced state of being dissolved or were they
relatively whole or how were they?

21

A. They couldn't be; otherwise the
girls wouldn't know it was Inderal.

22

23

24

25

Q. But the soup was cold I take it?

A. Yes.



GG 9

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Q. All right. They had not

3

dissolved very much I take it?

4

A. No.

5

Q. What was your reaction to find-

6

ing Inderal pills in your salad?

7

A. Well at that time I thought it

8

was somebody playing a joke on me.

9

Q. You thought it was a joke?

10

A. Yes. At that very moment when I

11

went out.

Q. You ~~had~~ the same response

12

to seeing pills in Mrs. Trayner's soup?

13

A. Yes.

14

Q. That it was a joke?

15

A. Yes.

16

Q. Did it occur to you that she was

17

not treating it as a joke? She appeared to be upset
and crying, did she not?

18

A. Well, it is difficult to tell

19

whether she was upset or not because she cries so
often.

20

Q. Okay. What happened then?

21

A. I think the supervisor came up.

22

Q. Do you remember who that was?

23

A. I think it was Miss Sword.

24

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Q. Miss Sword?

A. Yes.

Q. What happened when she arrived?

A. She was trying to calm Phyllis down.

Q. Yes. Did either of you - did you believe that you had swallowed any of the pills at any time?

A. Well, I thought that, you know - I had coffee so I thought maybe it was something in the coffee too.

Q. Yes. Was any treatment --

THE COMMISSIONER: You had some coffee?

THE WITNESS: Yes, I thought, you know, the coffee might contain some tablets too.

THE COMMISSIONER: Is this coffee that you had drunk or that you had --

THE WITNESS: The coffee - we always had a pot of coffee.

THE COMMISSIONER: Yes, I am sure, but --

THE WITNESS: And I was drinking some coffee earlier.

THE COMMISSIONER: Yes. I see. And you were afraid that there might be some in the coffee?

THE WITNESS: Yes.



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MR. LAMEK: Q. You didn't see any traces of these or any other kind of pills in the coffee?

A. No.

Q. Was some kind of treatment given to you either at the Hospital for Sick Children or anywhere else?

A. Well, we had blood taken by the resident on call, Dr. Malacky.

Q. At the Hospital for Sick Children?

A. Yes, in 4A.

Q. You had blood drawn by the resident on call?

A. Yes.

Q. Anything else done for you or to you?

A. By that time Mrs. Radojewski came.

Q. Yes?

A. She took us over to TGH.

Q. To the Emergency Department at TGH?

A. Yes.

Q. You received no treatment of any



GG 12

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kind at the Hospital for Sick Children?

3

A. No.

4

Q. What happened when you got to
the General?

5

6

A. Well, we went to the Emergency
Desk, and Liz was saying let me do the talking. And
she told those nurses there, she said these two nurses
accidentally swallowed some pills and they asked what
kind of pills and she said they don't know. So by
that time they were giving us peculiar looks.

9

11

Q. Yes. I can imagine they might
have been. But you did not volunteer any further
information to the people at the Emergency Department
of TGH?

12

13

14

A. No. We let Liz do the talking.

15

16

Q. You let Mrs. Radojewski do all
the talking?

17

A. Yes.

18

19

Q. And that was the story she gave
to them?

20

A. Yes.

21

Q. Then what happened?

22

A. Then we were taken into cubicles
and we had our usual signs taken.

23

Q. Into separate cubicles?

24

25



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GG 13

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A. Yes.

3

Q. All right.

4

A. Then I think we had an EKG

5

taken and --

6

Q. You had vital signs and an EKG

7

taken?

8

A. Yes. It was normal.

9

Q. You say we. At this stage you

can only tell me what happened to you.

10

A. Yes.

11

Q. Because you were in a cubicle

12

by yourself?

13

A. Yes.

14

Q. Okay. You had your vital signs

taken and EKG?

15

A. Yes.

16

Q. Anything else?

17

A. And then she said it would be a

18

good idea if you had the stomach pumped and I said,

19

you know, I thought - as I said, I thought I had some

20

in coffee so I went along with that. I wish I didn't,

21

and I had my stomach pumped and I was feeling awful.

22

Q. I take it that is not a

particularly pleasant experience?

23

A. It would have been much more

24

25



GG 14

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enjoyable if they had given me red wine.

3

Q. If they had given you what?

4

A. Red wine instead.

5

6

Q. I found that has the same effect
on me sometimes! All right, you underwent this
unpleasant experience?

7

A. Yes.

8

Q. Then what?

9

10

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13

A. Then I went out of the cubicle
and I saw Phyllis sitting there and she was so calm
and I was so - still feeling sick and I said they
finished with you early did you have a stomach pump
and she said I don't need one or I don't need to have
one.

14

15

Q. Did she say anything else? Did
you say anything else at that time?

16

A. No. Then we walked back to 4A.

17

18

Q. Did you go back on duty that
night?

19

A. No.

20

Q. You went home?

21

A. Went home.

22

23

24

25

Q. Just two other things if I may.
One, going back to the telephone calls. Is your
telephone number listed in the Toronto Telephone
Directory?



GG 15

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A. Not under my name.

3

Q. Under whose name is your number

4

listed?

5

A. My husband.

6

THE COMMISSIONER: Well, your husband
is Mr. Scott I take it?

7

THE WITNESS: Yes.

8

MR. LAMEK: Q. What are his initials
or what were his initials?

9

THE COMMISSIONER: Well, wait a minute.

10

MR. LAMEK: Okay. Well, fair enough.

11

Q. Are they different from your

12

own?

13

A. Yes.

14

Q. If I looked for S. K. Scott in

15

the Toronto telephone book I wouldn't find you?

16

A. Unless you know his name.

17

Q. Unless I know his name? Fair

18

enough. You're quite right.

19

Do you know where your telephone number

20

is available?

21

A. In 4A.

22

Q. On 4A?

23

A. And in Personnel Department.

24

Q. Yes?

25

25



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GG 16

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A. And the Accounts Department.

3

Q. Can you think of any other place

4

in or out of the hospital where your telephone number,
home telephone number, might be known?

5

A. No.

6

Q. Mrs. Scott, did you ever see

7

markings either upon your home or upon your car or

8

upon your locker at the hospital or anything of that

9

sort?

10

A. Once on my locker.

11

Q. All right. What was the marking

12

you saw on your locker? At the hospital I take it you
mean?

13

A. Yes.

14

Q. What did you see on your locker?

15

A. A red cross.

16

Q. Approximately when was that?

17

A. Oh I can't tell you when that

18

was but we were working on nights.

19

Q. In the fall of 1981 perhaps?

20

A. Yes.

21

Q. You were working on nights and

you saw a red cross marked on your locker?

22

A. Yes.

23

Q. How did it come about that you

24

25



GG 17

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saw that red cross marked on your locker?

3

A. Earlier on we had a ward clerk --

4

Q. I am sorry, I missed that.

5

A. We had a ward clerk working on
an evening shift.

6

Q. A ward clerk?

7

8

A. Yes, and apparently she had
received a call but she didn't tell anyone about it
until --

9

10

THE COMMISSIONER: She had a super --

11

MR. LAMEK: She had received a call.

12

THE COMMISSIONER: Oh, I see.

13

THE WITNESS: A threatening phone call.

14

THE COMMISSIONER: A ward clerk, she
got a phone call?

15

16

THE WITNESS: Yes. Apparently she
didn't tell us about it until she was getting ready to
go home.

17

18

MR. LAMEK: Q. She had received a
call at the hospital?

19

20

A. Yes.

21

Q. Yes?

22

A. I don't know what time she
received the phone call and I remember Phyllis was
angry with her because she didn't let us know

23

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immediately after she had received the call.

3

Q. She didn't tell you until she
was getting ready to go off duty?

4

5

A. Yes.

6

Q. That would be what, about 10
o'clock at night?

7

8

A. Well, she sometimes works late
so it would be about 10:30 or quarter to 11:00.

9

10

Q. All right. Then what happened?
What led you to see a cross on your locker door?

11

12

A. Well, Phyllis suggested that I
should go down and see whether we have any crosses on
our lockers.

13

14

Q. Had she been down did she tell
you?

15

16

A. No.

17

Q. But she suggested that you go
down?

18

19

20

21

22

A. She said why don't you go down
to see whether there are any marks on our lockers, to
see whether anybody is looking around downstairs in
the basement, and I say you expect anybody to look
around why don't you go downstairs.

23

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GG 18



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Q Good question. What was the answer?

A She said she couldn't leave the ward or something like that, so, she suggested it again so I went down.

Q Did you go alone?

A No.

Q Who went with you?

A I took two of the nurses.

Q All right. And what did you find?

A I went to my locker and I saw this cross on my locker. That's the first and last time I had a cross on my locker.

Q Did you on that occasion look at Mrs. Trayner's locker door?

A Yes.

Q Was there any marking on it?

A No.

Q Had you previously heard that Mrs. Trayner had had marks on her locker door?

A Yes.

Q Had you at any time prior to this occasion ever seen a mark on your own locker door?

A No.



HH.2

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THE COMMISSIONER: I'm sorry, was
it the same day or some other day?

4

THE WITNESS: Some other day.

5

THE COMMISSIONER: Some other day.
And you had heard that from whom, from Mrs. Trayner
did you?

6

7

THE WITNESS: Yes.

8

THE COMMISSIONER: Yes, whenever you
like, Mr. Lamek?

9

10

MR. LAMEK: I think just one last
question if I may?

11

12

THE COMMISSIONER: Yes, all right.

13

MR. LAMEK: Q. Mrs. Scott, I certainly
don't ask you to speculate or give us any unfounded
thoughts or ideas but I do ask you this. Do you now
recall ever having seen or heard anything at any time
between July 1980 and March 1981 that either then or
now in retrospect seems to you odd or unusual or
suspicious that might cast some light upon how these
children died? As I say, I don't ask you to speculate,
I just want you to cast your mind back over events.
Is there anything that stands out in your mind as
being clearly related or probably related to the
deaths of any of these children that you now consider
to have been odd or unusual or suspicious?

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A. Apart from the fact that they were all dying on our team and at the same time and not on other nights or with other teams, there is nothing else I can think of.

Q. Okay, you have no recollection of seeing anyone doing anything that you think now or thought then perhaps they should not have been doing?

A. No.

Q. Or anything of that sort?

A. No.

Q. Okay.

MR. LAMEK: All right, thank you, Mrs. Scott. I tell you, there is just one matter that I may want to ask a couple of questions about by way of a recap thing tomorrow morning but apart from that those are my questions, thank you.

THE COMMISSIONER: There is no danger of this week, there is no reason to sit early tomorrow, is there?

MR. LAMEK: I don't think there is a need to sit early tomorrow morning, Mr. Commissioner.

THE COMMISSIONER: Have you any idea, Mr. Rosenberg, how long you will be?

MR. ROSENBERG: I think I will be half



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an hour at the outside if that helps people.

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THE COMMISSIONER: Yes. I think I
will just leave it at that because I don't think we
are in trouble this week.

6

MR. LAMEK: Thank you, sir.

7

8

THE COMMISSIONER: We will rise until
10 o'clock tomorrow morning.

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--- Whereupon the hearing adjourned at 4:40 p.m.
until 10:00 a.m., Tuesday, March 20th, 1984.

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